

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Allstate Insurance Company PAC

ADDRESS (number and street)

2775 Sanders Road Suite A5

☐Check if different
than previously
reported. (ACC)

Northbrook

IL

60062

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00040253

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☒

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

04

01

2006

through

04

30

2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Steven C. Verney

Signature of Treasurer

Electronically Filed by Steven C. Verney

Date

05

17

2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Allstate Insurance Company PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	4	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	4	3	0	2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2006		113864.78
(b) Cash on Hand at Beginning of Reporting Period	149869.33	
(c) Total Receipts (from Line 19)	31269.65	146305.96
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	181138.98	260170.74
7. Total Disbursements (from Line 31)	53179.93	132211.69
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	127959.05	127959.05
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) .....	.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) .....	.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

Allstate Insurance Company PAC

Report Covering the Period:

From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	6

To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	22335.63	55813.67
(i) Itemized (use Schedule A)		
(ii) Unitemized	8933.37	90489.70
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➤	31269.00	146303.37
(b) Political Party Committees .....	.00	.00
(c) Other Political Committees (such as PACs) .....	.00	.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ➤	31269.00	146303.37
12. Transfers From Affiliated/Other Party Committees .....	.00	.00
13. All Loans Received .....	.00	.00
14. Loan Repayments Received .....	.00	.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	.00	.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	.00	.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.65	2.59
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	.00	.00
(b) Levin Funds (from Schedule H5) .....	.00	.00
(c) Total Transfer (add 18(a) and 18(b)).	.00	.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	31269.65	146305.96
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	31269.65	146305.96

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	.00	.00
(i) Federal Share.....		
(ii) Non-Federal Share.....	.00	.00
(b) Other Federal Operating Expenditures.....	229.93	761.69
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	229.93	761.69
22. Transfers to Affiliated/Other Party Committees.....	.00	.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	21500.00	51500.00
24. Independent Expenditure (use Schedule E) .....	.00	.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	.00	.00
26. Loan Repayments Made.....	.00	.00
27. Loans Made.....	.00	.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	.00	.00
(b) Political Party Committees .....	.00	.00
(c) Other Political Committees (such as PACs) .....	.00	.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	.00	.00
29. Other Disbursements.....	31450.00	79950.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	.00	.00
(ii) "Levin" Share .....	.00	.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	.00	.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	.00	.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	53179.93	132211.69
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	53179.93	132211.69

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	31269.00	146303.37
34. Total Contribution Refunds (from Line 28(d)) .....	.00	.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	31269.00	146303.37
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	229.93	761.69
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	.00	.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	229.93	761.69

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JONES G ADUKEH

Mailing Address 1226 RIDGEWOOD LANE

City State Zip Code
 LAKE VILLA IL 60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.22

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635804

Amount of Each Receipt this Period

27.69

Full Name (Last, First, Middle Initial)

B. LORAL ADUKEH

Mailing Address 1226 RIDGEWOOD LANE

City State Zip Code
 LAKE VILLA IL 60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
STAFF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635877

Amount of Each Receipt this Period

30.10

Full Name (Last, First, Middle Initial)

C. JONES G ADUKEH

Mailing Address 1226 RIDGEWOOD LANE

City State Zip Code
 LAKE VILLA IL 60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.91

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636323

Amount of Each Receipt this Period

27.69

SUBTOTAL of Receipts This Page (optional)

85.48

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
LORAL ADUKEH
Mailing Address 1226 RIDGEWOOD LANE

City State Zip Code
LAKE VILLA IL 60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
STAFF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.10

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636395

Amount of Each Receipt this Period

30.10

B. Full Name (Last, First, Middle Initial)
NANCY H ANDERSON
Mailing Address 25 BRUCE CIRCLE NORTH

City State Zip Code
HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Accounting Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.52

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635609

Amount of Each Receipt this Period

27.14

C. Full Name (Last, First, Middle Initial)
NANCY H ANDERSON
Mailing Address 25 BRUCE CIRCLE NORTH

City State Zip Code
HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Accounting Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.66

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636130

Amount of Each Receipt this Period

27.14

SUBTOTAL of Receipts This Page (optional)

84.38

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
DAVID ASCHENBRENNER

Mailing Address 330 FAIRWAY VIEW DRIVE

City State Zip Code
ALGONQUIN IL 60102

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.60

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635783

Amount of Each Receipt this Period

32.70

B. Full Name (Last, First, Middle Initial)
DAVID ASCHENBRENNER

Mailing Address 330 FAIRWAY VIEW DRIVE

City State Zip Code
ALGONQUIN IL 60102

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.30

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636303

Amount of Each Receipt this Period

32.70

C. Full Name (Last, First, Middle Initial)
JOHN P BADER

Mailing Address 438 MITCHELL DRIVE

City State Zip Code
GRAYS LAKE IL 60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP Enterprise Infrastruct

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.58

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635414

Amount of Each Receipt this Period

64.50

SUBTOTAL of Receipts This Page (optional)

129.90

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 196

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOHN P BADER

Mailing Address 438 MITCHELL DRIVE

City	State	Zip Code
GRAYS LAKE	IL	60030

FEC ID number of contributing
federal political committee.**C**Name of Employer
Allstate Insurance CompanyOccupation
VP Enterprise Infrastruct

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

545.08

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	0	6

Transaction ID: A2006-635938

Amount of Each Receipt this Period

64.50

Full Name (Last, First, Middle Initial)

B. CHARLES C BAGGS

Mailing Address 4435 SWILCAN BRIDGE LANE N

City	State	Zip Code
JACKSONVILLE	FL	32224

FEC ID number of contributing
federal political committee.**C**Name of Employer
Allstate Insurance CompanyOccupation
AVP-Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.26

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	0	6

Transaction ID: A2006-635524

Amount of Each Receipt this Period

29.66

Full Name (Last, First, Middle Initial)

C. CHARLES C BAGGS

Mailing Address 4435 SWILCAN BRIDGE LANE N

City	State	Zip Code
JACKSONVILLE	FL	32224

FEC ID number of contributing
federal political committee.**C**Name of Employer
Allstate Insurance CompanyOccupation
AVP-Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.92

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	0	6

Transaction ID: A2006-636047

Amount of Each Receipt this Period

29.66

SUBTOTAL of Receipts This Page (optional)

123.82

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial) DIANE G BAKER		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 0 6
Mailing Address 120 EAST SHERIDAN RD		Transaction ID: A2006-635519
City LAKE BLUFF	State IL	Zip Code 60044
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 46.36
Name of Employer Allstate Insurance Company	Occupation AVP-PRODUCT OPS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 355.48	

B. Full Name (Last, First, Middle Initial) RICHARD L BAKER		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 0 6
Mailing Address 1125 W ACORN TRAIL		Transaction ID: A2006-635574
City LAKE FOREST	State IL	Zip Code 60045
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 59.95
Name of Employer Allstate Insurance Company	Occupation Vice President Internal S	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 465.39	

C. Full Name (Last, First, Middle Initial) DIANE G BAKER		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 6
Mailing Address 120 EAST SHERIDAN RD		Transaction ID: A2006-636042
City LAKE BLUFF	State IL	Zip Code 60044
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 46.36
Name of Employer Allstate Insurance Company	Occupation AVP-PRODUCT OPS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 401.84	

SUBTOTAL of Receipts This Page (optional)

152.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)

RICHARD L BAKER

Mailing Address 1125 W ACORN TRAIL

City State Zip Code
 LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Internal S

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.34

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636095

Amount of Each Receipt this Period

59.95

B.

Full Name (Last, First, Middle Initial)

WILLIAM P BALLINGER

Mailing Address 47530 ABERDEEN DR

City State Zip Code
 NOVI MI 48374

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
FVP President New Jersey

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.24

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635494

Amount of Each Receipt this Period

32.31

C.

Full Name (Last, First, Middle Initial)

WILLIAM P BALLINGER

Mailing Address 47530 ABERDEEN DR

City State Zip Code
 NOVI MI 48374

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
FVP President New Jersey

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.55

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636017

Amount of Each Receipt this Period

32.31

SUBTOTAL of Receipts This Page (optional)

124.57

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
 ROBERT H BARGE III
 Mailing Address 2222 LOCH WAY

City State Zip Code
 EL DORADO HILLS CA 95762

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.40

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635891

Amount of Each Receipt this Period

61.49

B. Full Name (Last, First, Middle Initial)
 ROBERT H BARGE III
 Mailing Address 2222 LOCH WAY

City State Zip Code
 EL DORADO HILLS CA 95762

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

536.89

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636409

Amount of Each Receipt this Period

61.49

C. Full Name (Last, First, Middle Initial)
 DAVID J BAUMGARDNER
 Mailing Address 12620 Lake Normandy Lane

City State Zip Code
 Fairfax VA 22030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Regional Distribution Lea

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.93

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636092

Amount of Each Receipt this Period

23.72

SUBTOTAL of Receipts This Page (optional)

146.70

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
 DIANE BELLAS
 Mailing Address 632 Concord Way

City State Zip Code
 Prospect Heights IL 60070

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 Accounting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.44

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636158

Amount of Each Receipt this Period

23.31

B. Full Name (Last, First, Middle Initial)
 WALTER A BERKOWICZ
 Mailing Address 405 GATESHEAD DRIVE

City State Zip Code
 NAPERVILLE IL 60565

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 CC IT Planning Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.42

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635719

Amount of Each Receipt this Period

30.54

C. Full Name (Last, First, Middle Initial)
 WALTER A BERKOWICZ
 Mailing Address 405 GATESHEAD DRIVE

City State Zip Code
 NAPERVILLE IL 60565

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 CC IT Planning Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.96

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636239

Amount of Each Receipt this Period

30.54

SUBTOTAL of Receipts This Page (optional)

84.39

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)

EDWARD A BIEMER

Mailing Address 807 Greenwood Ave.

City State Zip Code
 GLENCOE IL 60022

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP and President Broker D

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.27

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635457

Amount of Each Receipt this Period

37.71

B. Full Name (Last, First, Middle Initial)

EDWARD A BIEMER

Mailing Address 807 Greenwood Ave.

City State Zip Code
 GLENCOE IL 60022

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP and President Broker D

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.98

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-635980

Amount of Each Receipt this Period

37.71

C. Full Name (Last, First, Middle Initial)

ANN L BIERNACKI

Mailing Address 11 Heron Drive

City State Zip Code
 Palatine IL 60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Staff Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.02

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636178

Amount of Each Receipt this Period

24.28

SUBTOTAL of Receipts This Page (optional)

99.70

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial) DAVID A BIRD		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 4 / 2 0 0 6
Mailing Address 24567 HARBOUR VIEW DRIVE		Transaction ID: A2006-635807 Amount of Each Receipt this Period 37.28
City PONTE VEDRA BEA	State FL	
Zip Code 32082		
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation President-Allstate Workpl	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 291.87	

B. Full Name (Last, First, Middle Initial) DAVID A BIRD		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 8 / 2 0 0 6
Mailing Address 24567 HARBOUR VIEW DRIVE		Transaction ID: A2006-636326 Amount of Each Receipt this Period 37.28
City PONTE VEDRA BEA	State FL	
Zip Code 32082		
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation President-Allstate Workpl	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 329.15	

C. Full Name (Last, First, Middle Initial) ROBERT L BLOCK		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 4 / 2 0 0 6
Mailing Address 398 Brookmont Lane		Transaction ID: A2006-635792 Amount of Each Receipt this Period 57.33
City North Barrington	State IL	
Zip Code 60010		
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Vice President Investor R	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 443.10	

SUBTOTAL of Receipts This Page (optional)

131.89

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
 ROBERT L BLOCK
 Mailing Address 398 Brookmont Lane

City State Zip Code
 North Barrington IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 Vice President Investor R

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.43

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636311

Amount of Each Receipt this Period

57.33

B. Full Name (Last, First, Middle Initial)
 CHARLES A BOLLINGER
 Mailing Address 509 GATES HEAD SOUTH

City State Zip Code
 ELK GROVE VLLGE IL 60007

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 AVP Agency Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

338.50

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635580

Amount of Each Receipt this Period

44.15

C. Full Name (Last, First, Middle Initial)
 CHARLES A BOLLINGER
 Mailing Address 509 GATES HEAD SOUTH

City State Zip Code
 ELK GROVE VLLGE IL 60007

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 AVP Agency Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

386.66

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636101

Amount of Each Receipt this Period

48.16

SUBTOTAL of Receipts This Page (optional)

149.64

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial) MICHAEL E BOND			Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 0 6	
Mailing Address 1246 PRAIRIE ORCHID LANE			Transaction ID: A2006-635751	
City State Zip Code GRAYSLAKE IL 60030		Amount of Each Receipt this Period 26.17		
FEC ID number of contributing federal political committee. C				
Name of Employer Allstate Insurance Company		Occupation F&P/Enterprise Risk Manag		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 204.46		
B. Full Name (Last, First, Middle Initial) MICHAEL E BOND			Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 6	
Mailing Address 1246 PRAIRIE ORCHID LANE			Transaction ID: A2006-636271	
City State Zip Code GRAYSLAKE IL 60030		Amount of Each Receipt this Period 26.17		
FEC ID number of contributing federal political committee. C				
Name of Employer Allstate Insurance Company		Occupation F&P/Enterprise Risk Manag		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.63		
C. Full Name (Last, First, Middle Initial) DOUGLAS L BORG			Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 6	
Mailing Address 5550 Maybeck Ln			Transaction ID: A2006-636406	
City State Zip Code Livermore CA 94550		Amount of Each Receipt this Period 24.40		
FEC ID number of contributing federal political committee. C				
Name of Employer Allstate Insurance Company		Occupation Territorial Distribution		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 213.80		

SUBTOTAL of Receipts This Page (optional)

76.74

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MICHAEL B BOYLE
Mailing Address 1063 CHERRY STREET

City State Zip Code
WINNETKA IL 60093

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Info Techn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

551.84

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635498

Amount of Each Receipt this Period

71.08

B. Full Name (Last, First, Middle Initial)
MICHAEL B BOYLE
Mailing Address 1063 CHERRY STREET

City State Zip Code
WINNETKA IL 60093

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Info Techn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

622.92

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636021

Amount of Each Receipt this Period

71.08

C. Full Name (Last, First, Middle Initial)
SHAWN L BROADFIELD
Mailing Address 1044 APPLE BLOSSOM COURT

City State Zip Code
LAKE ZURICH IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Finance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.37

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635650

Amount of Each Receipt this Period

37.19

SUBTOTAL of Receipts This Page (optional)

179.35

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
SHAWN L BROADFIELD

Mailing Address 1044 APPLE BLOSSOM COURT

City State Zip Code
LAKE ZURICH IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Finance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.56

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636170

Amount of Each Receipt this Period

37.19

B. Full Name (Last, First, Middle Initial)
DAVID C BROCK

Mailing Address 305 CHURCHILL LANE

City State Zip Code
GURNEE IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Senior Planning Con

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.66

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635507

Amount of Each Receipt this Period

33.47

C. Full Name (Last, First, Middle Initial)
J D BROCK

Mailing Address 4958 DAY LILY WAY

City State Zip Code
ACWORTH GA 30102

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Regional Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.31

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635813

Amount of Each Receipt this Period

31.87

SUBTOTAL of Receipts This Page (optional)

102.53

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
DAVID C BROCK
Mailing Address 305 CHURCHILL LANE

City State Zip Code
GURNEE IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Senior Planning Con

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.13

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636030

Amount of Each Receipt this Period

33.47

B. Full Name (Last, First, Middle Initial)
J D BROCK
Mailing Address 4958 DAY LILY WAY

City State Zip Code
ACWORTH GA 30102

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Regional Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.18

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636332

Amount of Each Receipt this Period

31.87

C. Full Name (Last, First, Middle Initial)
WILLIAM J BROOKS
Mailing Address 121 HOLLENDEN LANE

City State Zip Code
MADISON MS 39110

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Marketing Claims Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.06

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635538

Amount of Each Receipt this Period

25.47

SUBTOTAL of Receipts This Page (optional)

90.81

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. WILLIAM J BROOKS

Mailing Address 121 HOLLENDEN LANE

City State Zip Code
MADISON MS 39110

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Marketing Claims Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.53

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636060

Amount of Each Receipt this Period

25.47

Full Name (Last, First, Middle Initial)

B. BETH A BROWN

Mailing Address 2637 W. WILSON AVE.

City State Zip Code
CHICAGO IL 60625

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

318.16

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635584

Amount of Each Receipt this Period

39.77

Full Name (Last, First, Middle Initial)

C. BETH A BROWN

Mailing Address 2637 W. WILSON AVE.

City State Zip Code
CHICAGO IL 60625

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.93

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636105

Amount of Each Receipt this Period

39.77

SUBTOTAL of Receipts This Page (optional)

105.01

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 196

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial) CATHERINE S BRUNE Mailing Address 190 SAVANNA CT City State Zip Code LAKE FOREST IL 60045 FEC ID number of contributing federal political committee. C Name of Employer Allstate Insurance Company Occupation SVP & Chief Information O Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1238.49		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 0 6 Transaction ID: A2006-635523 Amount of Each Receipt this Period 161.54
B. Full Name (Last, First, Middle Initial) CATHERINE S BRUNE Mailing Address 190 SAVANNA CT City State Zip Code LAKE FOREST IL 60045 FEC ID number of contributing federal political committee. C Name of Employer Allstate Insurance Company Occupation SVP & Chief Information O Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1400.03		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 6 Transaction ID: A2006-636046 Amount of Each Receipt this Period 161.54
C. Full Name (Last, First, Middle Initial) ANNE MARIE L BRUNNER Mailing Address 2514 SOUTH WESLEY AVE City State Zip Code BERWYN IL 60402 FEC ID number of contributing federal political committee. C Name of Employer Allstate Insurance Company Occupation Home Office Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 263.47		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 0 6 Transaction ID: A2006-635644 Amount of Each Receipt this Period 33.54
SUBTOTAL of Receipts This Page (optional) ▶		356.62
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ANNE MARIE L BRUNNER

Mailing Address 2514 SOUTH WESLEY AVE

City

BERWYN

State

IL

Zip Code

60402

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

297.01

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636164

Amount of Each Receipt this Period

33.54

Full Name (Last, First, Middle Initial)

B. JOHN C BRUSE

Mailing Address 1434 WOODACRE DRIVE

City

MC LEAN

State

VA

Zip Code

22101

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President & Ast Gene

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

231.82

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635864

Amount of Each Receipt this Period

34.00

Full Name (Last, First, Middle Initial)

C. JOHN C BRUSE

Mailing Address 1434 WOODACRE DRIVE

City

MC LEAN

State

VA

Zip Code

22101

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President & Ast Gene

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

265.82

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636382

Amount of Each Receipt this Period

34.00

SUBTOTAL of Receipts This Page (optional)

101.54

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. STEVEN C BUCHHOLZ

Mailing Address 412 S. VAIL

City State Zip Code
 ARL HEIGHTS IL 60005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.56

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635602

Amount of Each Receipt this Period

29.92

Full Name (Last, First, Middle Initial)

B. STEVEN C BUCHHOLZ

Mailing Address 412 S. VAIL

City State Zip Code
 ARL HEIGHTS IL 60005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.48

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636123

Amount of Each Receipt this Period

29.92

Full Name (Last, First, Middle Initial)

C. DAVID N BUGGS

Mailing Address 12234 85TH AVE

City State Zip Code
 PLEASANT PR WI 53158

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Planning Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.56

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635793

Amount of Each Receipt this Period

31.82

SUBTOTAL of Receipts This Page (optional)

91.66

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
DAVID N BUGGS
Mailing Address 12234 85TH AVE

City State Zip Code
PLEASANT PR WI 53158

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Planning Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.38

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636312

Amount of Each Receipt this Period

31.82

B. Full Name (Last, First, Middle Initial)
KAREN E BURCKHARDT
Mailing Address 730 E. HAWTHORNE

City State Zip Code
ARLINGTON HTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP-Product

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

306.73

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635791

Amount of Each Receipt this Period

39.68

C. Full Name (Last, First, Middle Initial)
KAREN E BURCKHARDT
Mailing Address 730 E. HAWTHORNE

City State Zip Code
ARLINGTON HTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP-Product

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.41

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636310

Amount of Each Receipt this Period

39.68

SUBTOTAL of Receipts This Page (optional)

111.18

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 196

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
PEGGY BURROWS

Mailing Address 2628 HALSEY DRIVE

City State Zip Code
FLOWER MOUND TX 75028

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Marketing Claims Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.69

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635827

Amount of Each Receipt this Period

28.43

B. Full Name (Last, First, Middle Initial)
PEGGY BURROWS

Mailing Address 2628 HALSEY DRIVE

City State Zip Code
FLOWER MOUND TX 75028

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Marketing Claims Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.12

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636346

Amount of Each Receipt this Period

28.43

C. Full Name (Last, First, Middle Initial)
CECILE A BUTLER

Mailing Address 9309 ELIZABETH LANE

City State Zip Code
SPRING GROVE IL 60081

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP & Tax Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

647.83

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635396

Amount of Each Receipt this Period

83.91

SUBTOTAL of Receipts This Page (optional)

140.77

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
CECILE A BUTLER

Mailing Address 9309 ELIZABETH LANE

City State Zip Code
 SPRING GROVE IL 60081

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP & Tax Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

731.74

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-635920

Amount of Each Receipt this Period

83.91

B. Full Name (Last, First, Middle Initial)
D C BUTLER III

Mailing Address 15430 WHITE COLUMNS DRIVE

City State Zip Code
 ALPHARETTA GA 30004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Assistant Field Vice Pres

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.11

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635520

Amount of Each Receipt this Period

50.23

C. Full Name (Last, First, Middle Initial)
D C BUTLER III

Mailing Address 15430 WHITE COLUMNS DRIVE

City State Zip Code
 ALPHARETTA GA 30004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Assistant Field Vice Pres

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.34

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636043

Amount of Each Receipt this Period

50.23

SUBTOTAL of Receipts This Page (optional)

184.37

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 196

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. DEBORAH K CAMPBELL

Mailing Address 21863 NORTH TALL OAKS COURT

City State Zip Code
 KILDEER IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.37

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635766

Amount of Each Receipt this Period

57.81

Full Name (Last, First, Middle Initial)

B. DEBORAH K CAMPBELL

Mailing Address 21863 NORTH TALL OAKS COURT

City State Zip Code
 KILDEER IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

508.18

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636286

Amount of Each Receipt this Period

57.81

Full Name (Last, First, Middle Initial)

C. RAYMOND CELAYA

Mailing Address 21910 WEST PINE LAKE CIRCLE

City State Zip Code
 KILDEER IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Procurement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.31

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636427

Amount of Each Receipt this Period

22.77

SUBTOTAL of Receipts This Page (optional)

138.39

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
 DELIA M CHILGREN
 Mailing Address 2441-5TH AVENUE

City State Zip Code
 SACRAMENTO CA 95818

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.38

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635911

Amount of Each Receipt this Period

39.76

B. Full Name (Last, First, Middle Initial)
 DELIA M CHILGREN
 Mailing Address 2441-5TH AVENUE

City State Zip Code
 SACRAMENTO CA 95818

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.14

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636429

Amount of Each Receipt this Period

39.76

C. Full Name (Last, First, Middle Initial)
 SCOTT M CHRISTENSEN
 Mailing Address 20713 LEXINGTON LANE

City State Zip Code
 KILDEER IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.61

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635708

Amount of Each Receipt this Period

35.47

SUBTOTAL of Receipts This Page (optional)

114.99

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 196

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. SCOTT M CHRISTENSEN

Mailing Address 20713 LEXINGTON LANE

City State Zip Code
 KILDEER IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

314.08

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636228

Amount of Each Receipt this Period

35.47

Full Name (Last, First, Middle Initial)

B. MICHAEL A CLARK

Mailing Address 26115 N 104TH WAY

City State Zip Code
 SCOTTSDALE AZ 85255

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.68

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635436

Amount of Each Receipt this Period

41.96

Full Name (Last, First, Middle Initial)

C. MICHAEL A CLARK

Mailing Address 26115 N 104TH WAY

City State Zip Code
 SCOTTSDALE AZ 85255

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

363.64

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-635959

Amount of Each Receipt this Period

41.96

SUBTOTAL of Receipts This Page (optional)

119.39

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 196

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MARK P CLOGHESSY

Mailing Address 4343 LAWN AVE

City State Zip Code
 WESTERN SPRINGS IL 60558

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.99

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635570

Amount of Each Receipt this Period

32.13

Full Name (Last, First, Middle Initial)

B. MARK P CLOGHESSY

Mailing Address 4343 LAWN AVE

City State Zip Code
 WESTERN SPRINGS IL 60558

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.12

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636091

Amount of Each Receipt this Period

32.13

Full Name (Last, First, Middle Initial)

C. DEBORAH L CLOUSER

Mailing Address 4667 TAMWORTH DR

City State Zip Code
 PALM HARBOR FL 34685

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Field Corporate Re

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.58

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635738

Amount of Each Receipt this Period

26.71

SUBTOTAL of Receipts This Page (optional)

90.97

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 196

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. DEBORAH L CLOUSER

Mailing Address 4667 TAMWORTH DR

City State Zip Code
 PALM HARBOR FL 34685

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Field Corporate Re

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.29

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636258

Amount of Each Receipt this Period

26.71

Full Name (Last, First, Middle Initial)

B. LISA D COCHRANE

Mailing Address 270 FAIRVIEW AVENUE

City State Zip Code
 WINNETKA IL 60093

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.03

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636214

Amount of Each Receipt this Period

30.12

Full Name (Last, First, Middle Initial)

C. EDWARD T COLLINS

Mailing Address 809 DUNHILL COURT

City State Zip Code
 GURNEE IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.85

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635627

Amount of Each Receipt this Period

39.77

SUBTOTAL of Receipts This Page (optional)

96.60

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 196

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
EDWARD T COLLINS
Mailing Address 809 DUNHILL COURT

City State Zip Code
GURNEE IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

409.62

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636148

Amount of Each Receipt this Period

39.77

B. Full Name (Last, First, Middle Initial)
MICHAEL P COOGAN
Mailing Address 1609 SYRACUSE LN.

City State Zip Code
SCHAUMBURG IL 60193

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Planning Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.43

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635697

Amount of Each Receipt this Period

28.11

C. Full Name (Last, First, Middle Initial)
MICHAEL P COOGAN
Mailing Address 1609 SYRACUSE LN.

City State Zip Code
SCHAUMBURG IL 60193

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Planning Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.54

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636217

Amount of Each Receipt this Period

28.11

SUBTOTAL of Receipts This Page (optional)

95.99

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 196

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOAN M COONEY

Mailing Address 615 W. PARK ST.

City State Zip Code
 ARLINGTON HTS IL 60005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.60

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635634

Amount of Each Receipt this Period

37.35

Full Name (Last, First, Middle Initial)

B. JOAN M COONEY

Mailing Address 615 W. PARK ST.

City State Zip Code
 ARLINGTON HTS IL 60005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

328.95

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636155

Amount of Each Receipt this Period

37.35

Full Name (Last, First, Middle Initial)

C. RONALD L CORBIN

Mailing Address 14 Portrush Place

City State Zip Code
 BRENTWOOD TN 37027

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

496.95

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635820

Amount of Each Receipt this Period

64.28

SUBTOTAL of Receipts This Page (optional)

138.98

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
RONALD L CORBIN
Mailing Address 14 Portrush Place

City State Zip Code
BRENTWOOD TN 37027

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

561.23

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636339

Amount of Each Receipt this Period

64.28

B. Full Name (Last, First, Middle Initial)
WILLIAM G CRIMMINS
Mailing Address 218 S KASPAR

City State Zip Code
ARLINGTON HGTS. IL 60005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President & Deputy G

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

517.70

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635581

Amount of Each Receipt this Period

67.74

C. Full Name (Last, First, Middle Initial)
WILLIAM G CRIMMINS
Mailing Address 218 S KASPAR

City State Zip Code
ARLINGTON HGTS. IL 60005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President & Deputy G

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.44

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636102

Amount of Each Receipt this Period

67.74

SUBTOTAL of Receipts This Page (optional)

199.76

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
FREDERICK F CRIPE
Mailing Address 277 N. BILTMORE DRIVE

City State Zip Code
N. BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
GVP-Product Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

584.98

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635575

Amount of Each Receipt this Period

76.15

B. Full Name (Last, First, Middle Initial)
FREDERICK F CRIPE
Mailing Address 277 N. BILTMORE DRIVE

City State Zip Code
N. BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
GVP-Product Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

661.13

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636096

Amount of Each Receipt this Period

76.15

C. Full Name (Last, First, Middle Initial)
RICHARD C CRIST JR
Mailing Address 14 CARDINAL DRIVE

City State Zip Code
PRINCETON JUNCT NJ 08550

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

524.69

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635474

Amount of Each Receipt this Period

65.96

SUBTOTAL of Receipts This Page (optional)

218.26

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
 RICHARD C CRIST JR
 Mailing Address 14 CARDINAL DRIVE

City State Zip Code
 PRINCETON JUNCT NJ 08550

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

590.65

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-635997

Amount of Each Receipt this Period

65.96

B. Full Name (Last, First, Middle Initial)
 JOAN M CROCKETT
 Mailing Address 27 RIVER BEND CT

City State Zip Code
 LAKE BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 SVP Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

831.91

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635549

Amount of Each Receipt this Period

113.08

C. Full Name (Last, First, Middle Initial)
 JOAN M CROCKETT
 Mailing Address 27 RIVER BEND CT

City State Zip Code
 LAKE BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 SVP Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

944.99

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636070

Amount of Each Receipt this Period

113.08

SUBTOTAL of Receipts This Page (optional)

292.12

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. WILLIAM DALY

Mailing Address 22425 N LINDEN DR.

City

BARRINGTON

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Claim Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.72

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635456

Amount of Each Receipt this Period

35.74

Full Name (Last, First, Middle Initial)

B. WILLIAM DALY

Mailing Address 22425 N LINDEN DR.

City

BARRINGTON

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Claim Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.46

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-635979

Amount of Each Receipt this Period

35.74

Full Name (Last, First, Middle Initial)

C. ROBERT W DANIELS

Mailing Address 1020 Pleasant Street #1

City

Oak Park

State

IL

Zip Code

60302

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Communication Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.39

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635506

Amount of Each Receipt this Period

27.88

SUBTOTAL of Receipts This Page (optional)

99.36

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 196

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)

ROBERT W DANIELS

Mailing Address 1020 Pleasant Street #1

City State Zip Code
 Oak Park IL 60302

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Communication Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.27

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636029

Amount of Each Receipt this Period

27.88

B. Full Name (Last, First, Middle Initial)

SAM DE FRANK

Mailing Address 5 COURT OF HIDDEN WELLS

City State Zip Code
 NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP & Tax Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.70

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635641

Amount of Each Receipt this Period

32.02

C. Full Name (Last, First, Middle Initial)

SAM DE FRANK

Mailing Address 5 COURT OF HIDDEN WELLS

City State Zip Code
 NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP & Tax Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.72

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636161

Amount of Each Receipt this Period

32.02

SUBTOTAL of Receipts This Page (optional)

91.92

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. PETER D DEBRECENY

Mailing Address 1512 NORTH HOYNE AVE

City State Zip Code
 CHICAGO IL 60622

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Corporate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

457.06

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635563

Amount of Each Receipt this Period

58.62

Full Name (Last, First, Middle Initial)

B. PETER D DEBRECENY

Mailing Address 1512 NORTH HOYNE AVE

City State Zip Code
 CHICAGO IL 60622

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Corporate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

515.68

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636084

Amount of Each Receipt this Period

58.62

Full Name (Last, First, Middle Initial)

C. RANDAL S DECOURSEY

Mailing Address 6710 BLUE RIDGE LANE

City State Zip Code
 LINCOLN NE 68516

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.99

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635631

Amount of Each Receipt this Period

27.78

SUBTOTAL of Receipts This Page (optional)

145.02

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)

RANDAL S DECOURSEY

Mailing Address 6710 BLUE RIDGE LANE

City State Zip Code
 LINCOLN NE 68516

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.77

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636152

Amount of Each Receipt this Period

27.78

B. Full Name (Last, First, Middle Initial)

STEVEN J DEGNAN-SCHMIDT

Mailing Address 1320 MULBERRY LN.

City State Zip Code
 CARY IL 60013

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.09

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635554

Amount of Each Receipt this Period

34.08

C. Full Name (Last, First, Middle Initial)

STEVEN J DEGNAN-SCHMIDT

Mailing Address 1320 MULBERRY LN.

City State Zip Code
 CARY IL 60013

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.17

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636075

Amount of Each Receipt this Period

34.08

SUBTOTAL of Receipts This Page (optional)

95.94

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 196

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JEFFREY F DEIGL

Mailing Address 453 PRAIRIE

City State Zip Code
 ELMHURST IL 60126

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Specialty Lines

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

381.33

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635755

Amount of Each Receipt this Period

49.74

Full Name (Last, First, Middle Initial)

B. JEFFREY F DEIGL

Mailing Address 453 PRAIRIE

City State Zip Code
 ELMHURST IL 60126

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Specialty Lines

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

431.07

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636275

Amount of Each Receipt this Period

49.74

Full Name (Last, First, Middle Initial)

C. LORI A DESCH

Mailing Address 5 TREGONWELL COURT

City State Zip Code
 ALGONQUIN IL 60102

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claims Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.60

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635539

Amount of Each Receipt this Period

28.10

SUBTOTAL of Receipts This Page (optional)

127.58

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 196

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)

LORI A DESCH

Mailing Address 5 TREGONWELL COURT

City State Zip Code
 ALGONQUIN IL 60102

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claims Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.91

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636061

Amount of Each Receipt this Period

29.31

B. Full Name (Last, First, Middle Initial)

MARIE E DIVIRGILIO

Mailing Address 2063 CHARTER POINT DR

City State Zip Code
 ARLINGTON HTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Field Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.28

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635768

Amount of Each Receipt this Period

39.76

C. Full Name (Last, First, Middle Initial)

MARIE E DIVIRGILIO

Mailing Address 2063 CHARTER POINT DR

City State Zip Code
 ARLINGTON HTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Field Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.04

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636288

Amount of Each Receipt this Period

39.76

SUBTOTAL of Receipts This Page (optional)

108.83

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
SARAH R DONAHUE

Mailing Address 4147 RFD

City State Zip Code
LONG GROVE IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Northbrook/Glenbrook

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.93

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635729

Amount of Each Receipt this Period

35.69

B. Full Name (Last, First, Middle Initial)
SARAH R DONAHUE

Mailing Address 4147 RFD

City State Zip Code
LONG GROVE IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Northbrook/Glenbrook

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.62

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636249

Amount of Each Receipt this Period

35.69

C. Full Name (Last, First, Middle Initial)
TIMOTHY R DUGAN

Mailing Address 3220 SANDY LANE

City State Zip Code
GLENVIEW IL 60025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.20

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635858

Amount of Each Receipt this Period

28.40

SUBTOTAL of Receipts This Page (optional)

99.78

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. TIMOTHY R DUGAN

Mailing Address 3220 SANDY LANE

City State Zip Code
 GLENVIEW IL 60025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.60

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636376

Amount of Each Receipt this Period

28.40

Full Name (Last, First, Middle Initial)

B. DANIEL P DURBIN

Mailing Address 1311 SOUTH WALNUT AVE.

City State Zip Code
 ARLINGTON HTS. IL 60005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AF Operations Dept Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.54

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635736

Amount of Each Receipt this Period

26.63

Full Name (Last, First, Middle Initial)

C. DANIEL P DURBIN

Mailing Address 1311 SOUTH WALNUT AVE.

City State Zip Code
 ARLINGTON HTS. IL 60005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AF Operations Dept Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.17

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636256

Amount of Each Receipt this Period

26.63

SUBTOTAL of Receipts This Page (optional)

81.66

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
GEOFFREY A DURHAM
Mailing Address 504 ROOSEVELT DRIVE

City State Zip Code
LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Planning Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.05

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635870

Amount of Each Receipt this Period

32.60

B. Full Name (Last, First, Middle Initial)
GEOFFREY A DURHAM
Mailing Address 504 ROOSEVELT DRIVE

City State Zip Code
LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Planning Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.65

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636388

Amount of Each Receipt this Period

32.60

C. Full Name (Last, First, Middle Initial)
ELIZABETH A EDE
Mailing Address 16 LINDON LANE

City State Zip Code
VERNON HILLS IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.60

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635837

Amount of Each Receipt this Period

32.20

SUBTOTAL of Receipts This Page (optional)

97.40

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 47 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
ELIZABETH A EDE

Mailing Address 16 LINDON LANE

City State Zip Code
VERNON HILLS IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.80

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636355

Amount of Each Receipt this Period

32.20

B. Full Name (Last, First, Middle Initial)

JOHN EDELEN

Mailing Address 1250 So Indiana - Unit 1309

City State Zip Code
Chicago IL 60605

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP P-CCSO Strategy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.70

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635458

Amount of Each Receipt this Period

41.35

C. Full Name (Last, First, Middle Initial)

JOHN EDELEN

Mailing Address 1250 So Indiana - Unit 1309

City State Zip Code
Chicago IL 60605

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP P-CCSO Strategy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

363.05

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-635981

Amount of Each Receipt this Period

41.35

SUBTOTAL of Receipts This Page (optional)

114.90

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 196

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
NINA B EIDELL
Mailing Address 25 E. Superior # 11B

City State Zip Code
CHICAGO IL 60611

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Human Reso

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

472.03

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635402

Amount of Each Receipt this Period

61.06

B. Full Name (Last, First, Middle Initial)
NINA B EIDELL
Mailing Address 25 E. Superior # 11B

City State Zip Code
CHICAGO IL 60611

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Human Reso

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

533.09

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-635926

Amount of Each Receipt this Period

61.06

C. Full Name (Last, First, Middle Initial)
PHILIP L EMMANUELE
Mailing Address 1085 FOREST HILL RD.

City State Zip Code
LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Marketing Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.02

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635437

Amount of Each Receipt this Period

58.25

SUBTOTAL of Receipts This Page (optional)

180.37

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 49 / 196

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
PHILIP L EMMANUELE

Mailing Address 1085 FOREST HILL RD.

City State Zip Code
LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Marketing Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

516.27

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-635960

Amount of Each Receipt this Period

58.25

B. Full Name (Last, First, Middle Initial)
KATHLEEN N ENRIGHT

Mailing Address 10323 TRUMBULL AVE

City State Zip Code
CHICAGO IL 60655

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.83

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635745

Amount of Each Receipt this Period

33.61

C. Full Name (Last, First, Middle Initial)
KATHLEEN N ENRIGHT

Mailing Address 10323 TRUMBULL AVE

City State Zip Code
CHICAGO IL 60655

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.44

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636265

Amount of Each Receipt this Period

33.61

SUBTOTAL of Receipts This Page (optional)

125.47

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MAUREEN L ERBACH

Mailing Address 1416 ALTHEA DRIVE

City State Zip Code
MOUNT PROSPECT IL 60056

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Human Resource Senior Man

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.49

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635639

Amount of Each Receipt this Period

26.98

Full Name (Last, First, Middle Initial)

B. MAUREEN L ERBACH

Mailing Address 1416 ALTHEA DRIVE

City State Zip Code
MOUNT PROSPECT IL 60056

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Human Resource Senior Man

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.47

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636159

Amount of Each Receipt this Period

26.98

Full Name (Last, First, Middle Initial)

C. MICHAEL L ESCOBAR

Mailing Address 660 BALMORAL LANE

City State Zip Code
INVERNESS IL 60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Finance Innovation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

376.39

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635415

Amount of Each Receipt this Period

48.44

SUBTOTAL of Receipts This Page (optional)

102.40

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MICHAEL L ESCOBAR

Mailing Address 660 BALMORAL LANE

City State Zip Code
 INVERNESS IL 60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Finance Innovation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

424.83

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-635939

Amount of Each Receipt this Period

48.44

Full Name (Last, First, Middle Initial)

B. RICHARD B ESPINOZA

Mailing Address 673 HASTINGS ROAD

City State Zip Code
 WHEELING IL 60090

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Unclassified Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.19

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635661

Amount of Each Receipt this Period

29.83

Full Name (Last, First, Middle Initial)

C. RICHARD B ESPINOZA

Mailing Address 673 HASTINGS ROAD

City State Zip Code
 WHEELING IL 60090

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Unclassified Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

263.02

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636181

Amount of Each Receipt this Period

29.83

SUBTOTAL of Receipts This Page (optional)

108.10

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. THOMAS W EVANS

Mailing Address 1224 BARCLAY CIRCLE

City State Zip Code
 BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.91

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635454

Amount of Each Receipt this Period

40.47

Full Name (Last, First, Middle Initial)

B. THOMAS W EVANS

Mailing Address 1224 BARCLAY CIRCLE

City State Zip Code
 BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

353.38

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-635977

Amount of Each Receipt this Period

40.47

Full Name (Last, First, Middle Initial)

C. DOROTHY EVEN

Mailing Address 1130 KEYSTONE AVENUE

City State Zip Code
 RIVER FOREST IL 60305

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.25

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635625

Amount of Each Receipt this Period

78.81

SUBTOTAL of Receipts This Page (optional)

159.75

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
DOROTHY EVEN

Mailing Address 1130 KEYSTONE AVENUE

City State Zip Code
RIVER FOREST IL 60305

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

689.06

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636146

Amount of Each Receipt this Period

78.81

B. Full Name (Last, First, Middle Initial)
KATHRYN L FABYAN

Mailing Address 21209 WEST YORKSHIRE DRIVE

City State Zip Code
KILDEER IL 60049

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.12

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635802

Amount of Each Receipt this Period

36.39

C. Full Name (Last, First, Middle Initial)
KATHRYN L FABYAN

Mailing Address 21209 WEST YORKSHIRE DRIVE

City State Zip Code
KILDEER IL 60049

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.51

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636321

Amount of Each Receipt this Period

36.39

SUBTOTAL of Receipts This Page (optional)

151.59

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
GORDON S FALKNOR
Mailing Address 703 E CHERRY LN

City State Zip Code
ARLINGTON HTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

341.85

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635656

Amount of Each Receipt this Period

44.35

B. Full Name (Last, First, Middle Initial)
GORDON S FALKNOR
Mailing Address 703 E CHERRY LN

City State Zip Code
ARLINGTON HTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

386.20

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636176

Amount of Each Receipt this Period

44.35

C. Full Name (Last, First, Middle Initial)
CAROLYN A FILIPOVIC
Mailing Address 918 JUNIPER ROAD

City State Zip Code
GLENVIEW IL 60025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Regional Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.86

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636291

Amount of Each Receipt this Period

24.74

SUBTOTAL of Receipts This Page (optional)

113.44

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. DARYLL D FLETCHER

Mailing Address 22256 W MASHI CT

City State Zip Code
 IVANHOE IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-KNOWLEDGE DEVELOPMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635616

Amount of Each Receipt this Period

26.87

Full Name (Last, First, Middle Initial)

B. DARYLL D FLETCHER

Mailing Address 22256 W MASHI CT

City State Zip Code
 IVANHOE IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-KNOWLEDGE DEVELOPMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.87

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636137

Amount of Each Receipt this Period

26.87

Full Name (Last, First, Middle Initial)

C. KELLY F FOGARTY

Mailing Address 613 REX

City State Zip Code
 ELMHURST IL 60126

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Specialty Lines

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.99

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635649

Amount of Each Receipt this Period

35.65

SUBTOTAL of Receipts This Page (optional)

89.39

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)

KELLY F FOGARTY

Mailing Address 613 REX

City State Zip Code
 ELMHURST IL 60126

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Specialty Lines

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

313.64

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636169

Amount of Each Receipt this Period

35.65

B. Full Name (Last, First, Middle Initial)

PATRICIA W FRIDLEY

Mailing Address 945 Shermer Road

City State Zip Code
 NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

487.38

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635558

Amount of Each Receipt this Period

72.00

C. Full Name (Last, First, Middle Initial)

PATRICIA W FRIDLEY

Mailing Address 945 Shermer Road

City State Zip Code
 NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

559.38

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636079

Amount of Each Receipt this Period

72.00

SUBTOTAL of Receipts This Page (optional)

179.65

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MATTHEW D FULLER
Mailing Address 350 EDGE FIELD LANE

City State Zip Code
LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.96

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635557

Amount of Each Receipt this Period

39.77

B. Full Name (Last, First, Middle Initial)
MATTHEW D FULLER
Mailing Address 350 EDGE FIELD LANE

City State Zip Code
LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.73

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636078

Amount of Each Receipt this Period

39.77

C. Full Name (Last, First, Middle Initial)
VINCENT A FUSCO
Mailing Address 6 SUGAR MAPLE COURT

City State Zip Code
DIX HILLS NY 11746

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.48

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-635937

Amount of Each Receipt this Period

21.38

SUBTOTAL of Receipts This Page (optional)

100.92

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ANGELA FUSCO

Mailing Address 22255 MASHIE CT

City State Zip Code
 IVANHOE IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.54

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-635999

Amount of Each Receipt this Period

24.86

Full Name (Last, First, Middle Initial)

B. DOUGLAS F GAER

Mailing Address 5610 SOUTH 88th STREET

City State Zip Code
 LINCOLN NE 68526

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Nebraska Service Center

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.70

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636362

Amount of Each Receipt this Period

22.30

Full Name (Last, First, Middle Initial)

C. PATRICK C GALLERY

Mailing Address 2321 WEST STEEPLECHASE

City State Zip Code
 LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President & Assistan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.75

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635481

Amount of Each Receipt this Period

56.49

SUBTOTAL of Receipts This Page (optional)

103.65

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. PATRICK C GALLERY

Mailing Address 2321 WEST STEEPLECHASE

City State Zip Code
 LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President & Assistan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

492.24

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636004

Amount of Each Receipt this Period

56.49

Full Name (Last, First, Middle Initial)

B. KAREN C GARDNER

Mailing Address 1434 BAFFIN ROAD

City State Zip Code
 GLENVIEW IL 60025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Tax

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

506.12

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635842

Amount of Each Receipt this Period

65.75

Full Name (Last, First, Middle Initial)

C. KAREN C GARDNER

Mailing Address 1434 BAFFIN ROAD

City State Zip Code
 GLENVIEW IL 60025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Tax

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

571.87

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636360

Amount of Each Receipt this Period

65.75

SUBTOTAL of Receipts This Page (optional)

187.99

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
LYNN A GEHANT

Mailing Address 23W650 WOODWORTH PLACE

City State Zip Code
ROSELLE IL 60172

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior State Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.35

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635662

Amount of Each Receipt this Period

34.85

B. Full Name (Last, First, Middle Initial)
LYNN A GEHANT

Mailing Address 23W650 WOODWORTH PLACE

City State Zip Code
ROSELLE IL 60172

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior State Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.20

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636182

Amount of Each Receipt this Period

34.85

C. Full Name (Last, First, Middle Initial)
BONNIE S GILL

Mailing Address 1570 EDGEFIELD LANE

City State Zip Code
HOFFMAN ESTATES IL 60195

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP State Team

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.78

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635843

Amount of Each Receipt this Period

27.36

SUBTOTAL of Receipts This Page (optional)

97.06

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
 BONNIE S GILL
 Mailing Address 1570 EDGEFIELD LANE

City State Zip Code
 HOFFMAN ESTATES IL 60195

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 AVP State Team

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.14

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636361

Amount of Each Receipt this Period

27.36

B. Full Name (Last, First, Middle Initial)
 JOAN GILMORE
 Mailing Address 656 S BUCKINGHAM CT

City State Zip Code
 LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 Claim Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.73

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635416

Amount of Each Receipt this Period

39.77

C. Full Name (Last, First, Middle Initial)
 JOAN GILMORE
 Mailing Address 656 S BUCKINGHAM CT

City State Zip Code
 LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 Claim Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

409.50

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-635940

Amount of Each Receipt this Period

39.77

SUBTOTAL of Receipts This Page (optional)

106.90

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 62 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. DEBORAH C GIVENS

Mailing Address 4370 MILNER ROAD WEST

City State Zip Code
 BIRMINGHAM AL 35242

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Marketing Claims Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.88

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635809

Amount of Each Receipt this Period

41.50

Full Name (Last, First, Middle Initial)

B. DEBORAH C GIVENS

Mailing Address 4370 MILNER ROAD WEST

City State Zip Code
 BIRMINGHAM AL 35242

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Marketing Claims Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.38

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636328

Amount of Each Receipt this Period

41.50

Full Name (Last, First, Middle Initial)

C. MARLA F GLABE

Mailing Address 83 CARIBOU CROSSING

City State Zip Code
 NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.69

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635705

Amount of Each Receipt this Period

68.34

SUBTOTAL of Receipts This Page (optional)

151.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MARLA F GLABE
Mailing Address 83 CARIBOU CROSSING

City State Zip Code
NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

599.03

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636225

Amount of Each Receipt this Period

68.34

B. Full Name (Last, First, Middle Initial)
BARBARA H GOHR
Mailing Address 1601 OLD BARN CIRCLE

City State Zip Code
LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Administrative Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.27

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635536

Amount of Each Receipt this Period

25.98

C. Full Name (Last, First, Middle Initial)
BARBARA H GOHR
Mailing Address 1601 OLD BARN CIRCLE

City State Zip Code
LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Administrative Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.25

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636059

Amount of Each Receipt this Period

25.98

SUBTOTAL of Receipts This Page (optional)

120.30

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 64 / 196

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
ANN A GOULD

Mailing Address 4071 NEWPORT LANE

City State Zip Code
ARLINGTON HTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Associate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.46

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	0	6

Transaction ID: A2006-635905

Amount of Each Receipt this Period

30.47

B. Full Name (Last, First, Middle Initial)
ANN A GOULD

Mailing Address 4071 NEWPORT LANE

City State Zip Code
ARLINGTON HTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Associate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

267.93

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	0	6

Transaction ID: A2006-636423

Amount of Each Receipt this Period

30.47

C. Full Name (Last, First, Middle Initial)
KEVIN P GOW

Mailing Address 4 HAMPTON LANE

City State Zip Code
HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
VP AGENCY & CUSTOMER SUPP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.18

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	0	6

Transaction ID: A2006-635922

Amount of Each Receipt this Period

25.35

SUBTOTAL of Receipts This Page (optional)

86.29

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 65 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial) PAMELA P GRAY		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 8 / 2 0 0 6	
Mailing Address 50 E. BELLEVUE PL. #2402		Transaction ID: A2006-636335	
City CHICAGO	State IL	Zip Code 60611	Amount of Each Receipt this Period 24.24
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Data Center Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 214.66		

B. Full Name (Last, First, Middle Initial) JUDITH P GREFFIN		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 4 / 2 0 0 6	
Mailing Address 948 NORTH EUCLID AVENUE		Transaction ID: A2006-635562	
City OAK PARK	State IL	Zip Code 60302	Amount of Each Receipt this Period 37.96
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Senior Managing Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 292.41		

C. Full Name (Last, First, Middle Initial) JUDITH P GREFFIN		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 8 / 2 0 0 6	
Mailing Address 948 NORTH EUCLID AVENUE		Transaction ID: A2006-636083	
City OAK PARK	State IL	Zip Code 60302	Amount of Each Receipt this Period 37.96
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Senior Managing Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.37		

SUBTOTAL of Receipts This Page (optional)

100.16

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 66 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MARK A GRELLA

Mailing Address 1210 HADLEIGH DRIVE

City State Zip Code
WEST CHESTER PA 19380

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Assistant Field Vice Pres

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

367.02

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635450

Amount of Each Receipt this Period

46.28

B. Full Name (Last, First, Middle Initial)
MARK A GRELLA

Mailing Address 1210 HADLEIGH DRIVE

City State Zip Code
WEST CHESTER PA 19380

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Assistant Field Vice Pres

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

413.30

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-635973

Amount of Each Receipt this Period

46.28

C. Full Name (Last, First, Middle Initial)
KIRK HAGGARD

Mailing Address 6608 OCASO DRIVE

City State Zip Code
CASTLE ROCK CO 80108

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.92

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635901

Amount of Each Receipt this Period

26.04

SUBTOTAL of Receipts This Page (optional)

118.60

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 67 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
KIRK HAGGARD
Mailing Address 6608 OCASO DRIVE

City State Zip Code
CASTLE ROCK CO 80108

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.96

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636419

Amount of Each Receipt this Period

26.04

B. Full Name (Last, First, Middle Initial)
JAMES W HAIDU
Mailing Address 65 HILLBURN LN

City State Zip Code
N. BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Ivantage AVP Specialty Li

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

392.77

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635715

Amount of Each Receipt this Period

50.61

C. Full Name (Last, First, Middle Initial)
JAMES W HAIDU
Mailing Address 65 HILLBURN LN

City State Zip Code
N. BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Ivantage AVP Specialty Li

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

443.38

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636235

Amount of Each Receipt this Period

50.61

SUBTOTAL of Receipts This Page (optional)

127.26

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 68 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
 ROBERT F HAIR
 Mailing Address 17 NORTH TRAIL

City State Zip Code
 HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior State Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.59

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636424

Amount of Each Receipt this Period

24.96

B. Full Name (Last, First, Middle Initial)
 DANNY L HALE
 Mailing Address 1071 OLMSTED DRIVE

City State Zip Code
 LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP Chf Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1048.19

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635800

Amount of Each Receipt this Period

135.46

C. Full Name (Last, First, Middle Initial)
 DANNY L HALE
 Mailing Address 1071 OLMSTED DRIVE

City State Zip Code
 LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP Chf Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1183.65

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636319

Amount of Each Receipt this Period

135.46

SUBTOTAL of Receipts This Page (optional)

295.88

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 69 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
 RANDALL M HANSON
 Mailing Address 840 ALLEGHANY

City State Zip Code
 GRAYSLAKE IL 60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 Claims Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.17

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635852

Amount of Each Receipt this Period

29.74

B. Full Name (Last, First, Middle Initial)
 RANDALL M HANSON
 Mailing Address 840 ALLEGHANY

City State Zip Code
 GRAYSLAKE IL 60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 Claims Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.91

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636370

Amount of Each Receipt this Period

29.74

C. Full Name (Last, First, Middle Initial)
 HERBERT L HARRIS
 Mailing Address 1812 SOUTHVIEW CIRCLE

City State Zip Code
 BIRMINGHAM AL 35244

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 Marketing Claims Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.69

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635810

Amount of Each Receipt this Period

28.43

SUBTOTAL of Receipts This Page (optional)

87.91

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 70 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)

HERBERT L HARRIS

Mailing Address 1812 SOUTHVIEW CIRCLE

City State Zip Code
 BIRMINGHAM AL 35244

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Marketing Claims Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.12

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636329

Amount of Each Receipt this Period

28.43

B. Full Name (Last, First, Middle Initial)

MICHAEL L HARRISON

Mailing Address 1141 WINNERS CIRCLE

City State Zip Code
 LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1056.10

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635916

Amount of Each Receipt this Period

132.55

C. Full Name (Last, First, Middle Initial)

MICHAEL L HARRISON

Mailing Address 1141 WINNERS CIRCLE

City State Zip Code
 LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1188.65

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636434

Amount of Each Receipt this Period

132.55

SUBTOTAL of Receipts This Page (optional)

293.53

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 71 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. THOMAS K HEAU

Mailing Address 71 E. DIVISION ST. #1706

City State Zip Code
CHICAGO IL 60610

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Actuary and Direct

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.98

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636431

Amount of Each Receipt this Period

67.83

Full Name (Last, First, Middle Initial)

B. DANIEL J HEBEL

Mailing Address 28365 West Big Hollow Road

City State Zip Code
Ingleside IL 60041

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President PCCSO Fiel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

484.73

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635553

Amount of Each Receipt this Period

62.70

Full Name (Last, First, Middle Initial)

C. DANIEL J HEBEL

Mailing Address 28365 West Big Hollow Road

City State Zip Code
Ingleside IL 60041

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President PCCSO Fiel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

547.43

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636074

Amount of Each Receipt this Period

62.70

SUBTOTAL of Receipts This Page (optional)

193.23

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 72 / 196

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial) RICHARD J HENEBERRY Mailing Address 23 CLAYTON City State Zip Code LAKE VILLA IL 60046 FEC ID number of contributing federal political committee. C Name of Employer Allstate Insurance Company Occupation AVP Intract Marketing Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 202.84		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 6 Transaction ID: A2006-636107 Amount of Each Receipt this Period 23.23
B. Full Name (Last, First, Middle Initial) ROBERT L HERRING Mailing Address 4337 SPRUCE BOUGH DR City State Zip Code MARIETTA GA 30062 FEC ID number of contributing federal political committee. C Name of Employer Allstate Insurance Company Occupation Distribution Support Lead Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 221.21		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 0 6 Transaction ID: A2006-635806 Amount of Each Receipt this Period 28.42
C. Full Name (Last, First, Middle Initial) ROBERT L HERRING Mailing Address 4337 SPRUCE BOUGH DR City State Zip Code MARIETTA GA 30062 FEC ID number of contributing federal political committee. C Name of Employer Allstate Insurance Company Occupation Distribution Support Lead Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 249.63		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 6 Transaction ID: A2006-636325 Amount of Each Receipt this Period 28.42

SUBTOTAL of Receipts This Page (optional)

80.07

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 73 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
WILLIAM G HILL
Mailing Address 2935 GLENARYE DRIVE

City State Zip Code
LINDENHURST IL 60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Product

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.50

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635505

Amount of Each Receipt this Period

77.28

B. Full Name (Last, First, Middle Initial)
WILLIAM G HILL
Mailing Address 2935 GLENARYE DRIVE

City State Zip Code
LINDENHURST IL 60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Product

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

497.78

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636028

Amount of Each Receipt this Period

77.28

C. Full Name (Last, First, Middle Initial)
MERRILD A HOOVER
Mailing Address 49 DORAL STREET

City State Zip Code
HURRICANE WV 25526

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Market Distribution Leade

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.14

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636033

Amount of Each Receipt this Period

22.46

SUBTOTAL of Receipts This Page (optional)

177.02

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 74 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOHN F HUDDLESTON

Mailing Address 1230 W WEATHERSFIELD WAY

City State Zip Code
 SCHAUMBURG IL 60193

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Property Research Directo

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

314.17

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-663097

Amount of Each Receipt this Period

39.74

Full Name (Last, First, Middle Initial)

B. JOHN J HUSTED

Mailing Address 11 RUTGERS COURT

City State Zip Code
 HAWTHORNE WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.18

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635411

Amount of Each Receipt this Period

39.76

Full Name (Last, First, Middle Initial)

C. JOHN J HUSTED

Mailing Address 11 RUTGERS COURT

City State Zip Code
 HAWTHORNE WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.94

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-635935

Amount of Each Receipt this Period

39.76

SUBTOTAL of Receipts This Page (optional)

119.26

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 75 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
STEPHEN L IHM

Mailing Address 21558 W GOLDFINCH CT

City State Zip Code
KILDEER IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.95

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635690

Amount of Each Receipt this Period

39.77

B. Full Name (Last, First, Middle Initial)
STEPHEN L IHM

Mailing Address 21558 W GOLDFINCH CT

City State Zip Code
KILDEER IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.72

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636210

Amount of Each Receipt this Period

39.77

C. Full Name (Last, First, Middle Initial)
LYNNE A IVERSON

Mailing Address 890 BLAZING STAR TRAIL

City State Zip Code
CARY IL 60013

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Sourcing Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.76

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635640

Amount of Each Receipt this Period

26.27

SUBTOTAL of Receipts This Page (optional)

105.81

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 76 / 196

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)

LYNNE A IVERSON

Mailing Address 890 BLAZING STAR TRAIL

City	State	Zip Code
CARY	IL	60013

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Senior Sourcing Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.03

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	0	6

Transaction ID: A2006-636160

Amount of Each Receipt this Period

26.27

B.

Full Name (Last, First, Middle Initial)

JAMES C JAMIESON

Mailing Address 25 BRUCE CIRCLE NORTH

City	State	Zip Code
HAWTHORN WOODS	IL	60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
F&P/Enterprise Risk Manag

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.91

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	0	6

Transaction ID: A2006-635600

Amount of Each Receipt this Period

30.52

C.

Full Name (Last, First, Middle Initial)

JAMES C JAMIESON

Mailing Address 25 BRUCE CIRCLE NORTH

City	State	Zip Code
HAWTHORN WOODS	IL	60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
F&P/Enterprise Risk Manag

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.43

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	0	6

Transaction ID: A2006-636121

Amount of Each Receipt this Period

30.52

SUBTOTAL of Receipts This Page (optional)

87.31

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
LARRY D JOHNSON

Mailing Address 21943 W VERNON RIDGE DRIVE

City State Zip Code
 MUNDELEIN IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Catastrophe Managemen

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.54

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635579

Amount of Each Receipt this Period

51.96

B. Full Name (Last, First, Middle Initial)
LARRY D JOHNSON

Mailing Address 21943 W VERNON RIDGE DRIVE

City State Zip Code
 MUNDELEIN IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Catastrophe Managemen

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.50

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636100

Amount of Each Receipt this Period

51.96

C. Full Name (Last, First, Middle Initial)
DOLORES M JOSSUND

Mailing Address 4242 W. HARRINGTON LANE

City State Zip Code
 CHICAGO IL 60646

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

331.91

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635677

Amount of Each Receipt this Period

39.77

SUBTOTAL of Receipts This Page (optional)

143.69

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 78 / 196

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
DOLORES M JOSSUND

Mailing Address 4242 W. HARRINGTON LANE

City State Zip Code
CHICAGO IL 60646

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

371.68

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636197

Amount of Each Receipt this Period

39.77

B. Full Name (Last, First, Middle Initial)
JEFF L KAUFMAN

Mailing Address 5271 SERENE VIEW WAY

City State Zip Code
PARKER CO 80134

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

586.90

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635868

Amount of Each Receipt this Period

74.64

C. Full Name (Last, First, Middle Initial)
JEFF L KAUFMAN

Mailing Address 5271 SERENE VIEW WAY

City State Zip Code
PARKER CO 80134

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

661.54

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636386

Amount of Each Receipt this Period

74.64

SUBTOTAL of Receipts This Page (optional)

189.05

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 79 / 196

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. TERRY KELAHER

Mailing Address 924 W. CHESTERFIELD CT.

City State Zip Code
 PALATINE IL 60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President & General

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

611.18

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635686

Amount of Each Receipt this Period

78.13

Full Name (Last, First, Middle Initial)

B. TERRY KELAHER

Mailing Address 924 W. CHESTERFIELD CT.

City State Zip Code
 PALATINE IL 60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President & General

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

689.31

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636206

Amount of Each Receipt this Period

78.13

Full Name (Last, First, Middle Initial)

C. CHRISTOPHER R KIAH

Mailing Address 1975 ROSE TERRACE

City State Zip Code
 RIVERWOODS IL 60015

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior State Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

314.83

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635399

Amount of Each Receipt this Period

39.76

SUBTOTAL of Receipts This Page (optional)

196.02

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 80 / 196

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
CHRISTOPHER R KIAH
Mailing Address 1975 ROSE TERRACE

City State Zip Code
RIVERWOODS IL 60015

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior State Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

354.59

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-635923

Amount of Each Receipt this Period

39.76

B. Full Name (Last, First, Middle Initial)
CURTIS L KIBLER
Mailing Address 1332 BAY MEADOWS DR

City State Zip Code
BARTLETT IL 60103

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

271.22

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635603

Amount of Each Receipt this Period

35.14

C. Full Name (Last, First, Middle Initial)
CURTIS L KIBLER
Mailing Address 1332 BAY MEADOWS DR

City State Zip Code
BARTLETT IL 60103

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

306.36

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636124

Amount of Each Receipt this Period

35.14

SUBTOTAL of Receipts This Page (optional)

110.04

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 81 / 196

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
PAUL N KIERIG
Mailing Address 200 OXFORD RD

City State Zip Code
Tower Lakes IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.80

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636191

Amount of Each Receipt this Period

24.01

B. Full Name (Last, First, Middle Initial)
JAMES P KING
Mailing Address 592 TURNER AVENUE

City State Zip Code
GLEN ELLYN IL 60137

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.80

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635749

Amount of Each Receipt this Period

34.45

C. Full Name (Last, First, Middle Initial)
JAMES P KING
Mailing Address 592 TURNER AVENUE

City State Zip Code
GLEN ELLYN IL 60137

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.25

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636269

Amount of Each Receipt this Period

34.45

SUBTOTAL of Receipts This Page (optional)

92.91

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JEFFREY D KNIPP

Mailing Address 2050 GLENDALE AVE

City State Zip Code
 NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.13

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635849

Amount of Each Receipt this Period

26.66

Full Name (Last, First, Middle Initial)

B. JEFFREY D KNIPP

Mailing Address 2050 GLENDALE AVE

City State Zip Code
 NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.79

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636367

Amount of Each Receipt this Period

26.66

Full Name (Last, First, Middle Initial)

C. GARY L KOCHANNEK

Mailing Address 743 CARDIGAN CT

City State Zip Code
 NAPERVILLE IL 60565

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claims Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.60

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635611

Amount of Each Receipt this Period

32.70

SUBTOTAL of Receipts This Page (optional)

86.02

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
GARY L KOCHANKE

Mailing Address 743 CARDIGAN CT

City State Zip Code
 NAPERVILLE IL 60565

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claims Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.30

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636132

Amount of Each Receipt this Period

32.70

B. Full Name (Last, First, Middle Initial)

KAREN L KRAINZ

Mailing Address 23080 W MILTON ROAD

City State Zip Code
 MUNDELEIN IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

267.93

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635782

Amount of Each Receipt this Period

35.51

C. Full Name (Last, First, Middle Initial)

KAREN L KRAINZ

Mailing Address 23080 W MILTON ROAD

City State Zip Code
 MUNDELEIN IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.44

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636302

Amount of Each Receipt this Period

35.51

SUBTOTAL of Receipts This Page (optional)

103.72

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOANNE L KRON

Mailing Address 341 N FIORE PARKWAY

City State Zip Code
 VERNON HILLS IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

353.96

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635606

Amount of Each Receipt this Period

39.77

Full Name (Last, First, Middle Initial)

B. JOANNE L KRON

Mailing Address 341 N FIORE PARKWAY

City State Zip Code
 VERNON HILLS IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

393.73

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636127

Amount of Each Receipt this Period

39.77

Full Name (Last, First, Middle Initial)

C. MICHAEL A LA MONICA

Mailing Address 22401 BROOKSIDE WAY

City State Zip Code
 LAKE BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Product

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

509.34

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635675

Amount of Each Receipt this Period

65.33

SUBTOTAL of Receipts This Page (optional)

144.87

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MICHAEL A LA MONICA

Mailing Address 22401 BROOKSIDE WAY

City State Zip Code
LAKE BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Product

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

574.67

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636195

Amount of Each Receipt this Period

65.33

B. Full Name (Last, First, Middle Initial)

ANTHONY LASKA

Mailing Address 2707 SKYLINE DRIVE

City State Zip Code
CRYSTAL LAKE IL 60012

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Technology Shared Ser

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.36

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635426

Amount of Each Receipt this Period

42.67

C. Full Name (Last, First, Middle Initial)

ANTHONY LASKA

Mailing Address 2707 SKYLINE DRIVE

City State Zip Code
CRYSTAL LAKE IL 60012

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Technology Shared Ser

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.03

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-635950

Amount of Each Receipt this Period

42.67

SUBTOTAL of Receipts This Page (optional)

150.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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or each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
PHILLIP E LAWSON

Mailing Address 900 PARK AVENUE NORTH

City State Zip Code
WINTER PARK FL 32789

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

542.34

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635855

Amount of Each Receipt this Period

69.56

B. Full Name (Last, First, Middle Initial)
PHILLIP E LAWSON

Mailing Address 900 PARK AVENUE NORTH

City State Zip Code
WINTER PARK FL 32789

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

611.90

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636373

Amount of Each Receipt this Period

69.56

C. Full Name (Last, First, Middle Initial)
CATHY A LAZAROFF

Mailing Address 910 S MICHIGAN AVE #1503

City State Zip Code
CHICAGO IL 60605

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.02

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635412

Amount of Each Receipt this Period

55.62

SUBTOTAL of Receipts This Page (optional)

194.74

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 87 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
CATHY A LAZAROFF

Mailing Address 910 S MICHIGAN AVE #1503

City State Zip Code
 CHICAGO IL 60605

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Vice President Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.64

Date of Receipt

M M / D D / Y Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-635936

Amount of Each Receipt this Period

55.62

B. Full Name (Last, First, Middle Initial)
MICHELLE LEE

Mailing Address 1404 100TH AVENUE NE

City State Zip Code
 BELLEVUE WA 98004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

421.33

Date of Receipt

M M / D D / Y Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635908

Amount of Each Receipt this Period

54.04

C. Full Name (Last, First, Middle Initial)
MICHELLE LEE

Mailing Address 1404 100TH AVENUE NE

City State Zip Code
 BELLEVUE WA 98004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.37

Date of Receipt

M M / D D / Y Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636426

Amount of Each Receipt this Period

54.04

SUBTOTAL of Receipts This Page (optional)

163.70

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 88 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
 SUSAN L LEES
 Mailing Address 1705 DARTMOUTH LN

City State Zip Code
 DEERFIELD IL 60015

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.96

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-635921

Amount of Each Receipt this Period

23.27

B. Full Name (Last, First, Middle Initial)
 ANDREW P LEIGHT
 Mailing Address 25658 N ARROWHEAD

City State Zip Code
 MUNDELEIN IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 CC IT Planning Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.52

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635617

Amount of Each Receipt this Period

32.69

C. Full Name (Last, First, Middle Initial)
 ANDREW P LEIGHT
 Mailing Address 25658 N ARROWHEAD

City State Zip Code
 MUNDELEIN IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 CC IT Planning Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.21

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636138

Amount of Each Receipt this Period

32.69

SUBTOTAL of Receipts This Page (optional)

88.65

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
CHRISTOPHER T LONGEWAY

Mailing Address 1134 W. PATTERSON #1

City State Zip Code
CHICAGO IL 60613

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Associate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.01

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635685

Amount of Each Receipt this Period

27.02

B. Full Name (Last, First, Middle Initial)
CHRISTOPHER T LONGEWAY

Mailing Address 1134 W. PATTERSON #1

City State Zip Code
CHICAGO IL 60613

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Associate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.03

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636205

Amount of Each Receipt this Period

27.02

C. Full Name (Last, First, Middle Initial)
JOHN C LOUNDS

Mailing Address 4424 STONEHAVEN

City State Zip Code
LONG GROVE IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Product AF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.80

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635780

Amount of Each Receipt this Period

35.40

SUBTOTAL of Receipts This Page (optional)

89.44

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOHN C LOUNDS

Mailing Address 4424 STONEHAVEN

City State Zip Code
 LONG GROVE IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Product AF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.20

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636300

Amount of Each Receipt this Period

35.40

Full Name (Last, First, Middle Initial)

B. BENJAMIN E LUMICAO

Mailing Address 343 S. DEARBORN ST. APT. 504

City State Zip Code
 CHICAGO IL 60604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Associate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.30

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635733

Amount of Each Receipt this Period

29.40

Full Name (Last, First, Middle Initial)

C. BENJAMIN E LUMICAO

Mailing Address 343 S. DEARBORN ST. APT. 504

City State Zip Code
 CHICAGO IL 60604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Associate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.70

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636253

Amount of Each Receipt this Period

29.40

SUBTOTAL of Receipts This Page (optional)

94.20

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
DANIEL J MACDONALD
Mailing Address 2250 RIDGETRAIL DR

City State Zip Code
CASTLE ROCK CO 80104

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Regional Distribution Lea

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.39

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636314

Amount of Each Receipt this Period

22.96

B. Full Name (Last, First, Middle Initial)
MORRIS A MADURO
Mailing Address PO BOX 4343

City State Zip Code
NAPERVILLE IL 60567

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.31

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635425

Amount of Each Receipt this Period

36.22

C. Full Name (Last, First, Middle Initial)
MORRIS A MADURO
Mailing Address PO BOX 4343

City State Zip Code
NAPERVILLE IL 60567

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.53

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-635949

Amount of Each Receipt this Period

36.22

SUBTOTAL of Receipts This Page (optional)

95.40

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. THOMAS L MAIO

Mailing Address 1214 EAST CRABTREE

City State Zip Code
 ARLINGTON HTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Accounting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.24

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635646

Amount of Each Receipt this Period

26.03

Full Name (Last, First, Middle Initial)

B. THOMAS L MAIO

Mailing Address 1214 EAST CRABTREE

City State Zip Code
 ARLINGTON HTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Accounting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.27

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636166

Amount of Each Receipt this Period

26.03

Full Name (Last, First, Middle Initial)

C. FELIX A MANTILLA

Mailing Address 28601 N. Sky Crest Drive

City State Zip Code
 Ivanhoe IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

351.42

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635798

Amount of Each Receipt this Period

45.38

SUBTOTAL of Receipts This Page (optional)

97.44

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
 FELIX A MANTILLA
 Mailing Address 28601 N. Sky Crest Drive

City State Zip Code
 Ivanhoe IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.80

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636317

Amount of Each Receipt this Period

45.38

B. Full Name (Last, First, Middle Initial)
 MICHAEL J MC CABE
 Mailing Address 8 S. WYNSTONE DRIVE

City State Zip Code
 N. BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 SVP & Chief Legal Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

861.73

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635871

Amount of Each Receipt this Period

115.39

C. Full Name (Last, First, Middle Initial)
 MICHAEL J MC CABE
 Mailing Address 8 S. WYNSTONE DRIVE

City State Zip Code
 N. BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 SVP & Chief Legal Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

977.12

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636389

Amount of Each Receipt this Period

115.39

SUBTOTAL of Receipts This Page (optional)

276.16

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 94 / 196

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. GERARD F MC DERMOTT

Mailing Address 5378 BLACK BEAR LANE

City State Zip Code
 ROANOKE VA 24014

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Operations Center

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.88

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635410

Amount of Each Receipt this Period

29.63

Full Name (Last, First, Middle Initial)

B. GERARD F MC DERMOTT

Mailing Address 5378 BLACK BEAR LANE

City State Zip Code
 ROANOKE VA 24014

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Operations Center

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.51

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-635934

Amount of Each Receipt this Period

29.63

Full Name (Last, First, Middle Initial)

C. MARY J MC GINN

Mailing Address 155 BUCKLEY ROAD

City State Zip Code
 BARRINGTON HILL IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President & Deputy G

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

571.31

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635714

Amount of Each Receipt this Period

72.70

SUBTOTAL of Receipts This Page (optional)

131.96

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MARY J MC GINN
Mailing Address 155 BUCKLEY ROAD

City State Zip Code
BARRINGTON HILL IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President & Deputy G

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

644.01

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636234

Amount of Each Receipt this Period

72.70

B. Full Name (Last, First, Middle Initial)
DAVID A MC HALE
Mailing Address 8756 MAPLE HOLLOW CT.

City State Zip Code
GRANITE BAY CA 95746

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

447.97

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635647

Amount of Each Receipt this Period

53.02

C. Full Name (Last, First, Middle Initial)
DAVID A MC HALE
Mailing Address 8756 MAPLE HOLLOW CT.

City State Zip Code
GRANITE BAY CA 95746

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.99

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636167

Amount of Each Receipt this Period

53.02

SUBTOTAL of Receipts This Page (optional)

178.74

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOHN A MC LAUGHLIN

Mailing Address 3851 N. Parkway Drive #21C

City State Zip Code
 Northbrook IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.88

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635660

Amount of Each Receipt this Period

38.36

Full Name (Last, First, Middle Initial)

B. JOHN A MC LAUGHLIN

Mailing Address 3851 N. Parkway Drive #21C

City State Zip Code
 Northbrook IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

338.24

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636180

Amount of Each Receipt this Period

38.36

Full Name (Last, First, Middle Initial)

C. CHARLTON T MCDONALD

Mailing Address 195 ALPINE DRIVE

City State Zip Code
 LAKE ZURICH IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Insurance Reserve

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.59

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636115

Amount of Each Receipt this Period

25.29

SUBTOTAL of Receipts This Page (optional)

102.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MARK J MCDONNELL

Mailing Address 70 MC ECHRON LANE

City State Zip Code
QUEENSBURY NY 12804

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Regional Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.02

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-635990

Amount of Each Receipt this Period

25.03

Full Name (Last, First, Middle Initial)

B. EVA M MCINTEE

Mailing Address 28 MANCERA

City State Zip Code
RANCHO SANTA MA CA 92688

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Marketing Claims Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.69

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635875

Amount of Each Receipt this Period

28.43

Full Name (Last, First, Middle Initial)

C. EVA M MCINTEE

Mailing Address 28 MANCERA

City State Zip Code
RANCHO SANTA MA CA 92688

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Marketing Claims Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.12

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636393

Amount of Each Receipt this Period

28.43

SUBTOTAL of Receipts This Page (optional)

81.89

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MICHAEL MCKINNEY
Mailing Address 1207 DEVENS DRIVE

City State Zip Code
BRENTWOOD TN 37027

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Assistant Field Vice Pres

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

334.29

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635499

Amount of Each Receipt this Period

42.88

B. Full Name (Last, First, Middle Initial)
MICHAEL MCKINNEY
Mailing Address 1207 DEVENS DRIVE

City State Zip Code
BRENTWOOD TN 37027

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Assistant Field Vice Pres

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.17

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636022

Amount of Each Receipt this Period

42.88

C. Full Name (Last, First, Middle Initial)
RONALD D MCNEIL
Mailing Address 76 HILLBURN LANE

City State Zip Code
NO BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP-Protection Distributi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

871.09

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635778

Amount of Each Receipt this Period

112.15

SUBTOTAL of Receipts This Page (optional)

197.91

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)

RONALD D MCNEIL

Mailing Address 76 HILLBURN LANE

City State Zip Code
 NO BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP-Protection Distributi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

983.24

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636298

Amount of Each Receipt this Period

112.15

B. Full Name (Last, First, Middle Initial)

GARY A MELLINI

Mailing Address 21050 PRESTWICK DRIVE

City State Zip Code
 BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President PCCSO Fiel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.01

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635418

Amount of Each Receipt this Period

31.31

C. Full Name (Last, First, Middle Initial)

GARY A MELLINI

Mailing Address 21050 PRESTWICK DRIVE

City State Zip Code
 BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President PCCSO Fiel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.32

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-635942

Amount of Each Receipt this Period

31.31

SUBTOTAL of Receipts This Page (optional)

174.77

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 100 / 196

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
JANE M MELLON

Mailing Address 184 GARFIELD

City	State	Zip Code
ELMHURST	IL	60126

FEC ID number of contributing
federal political committee.**C**Name of Employer
Allstate Insurance CompanyOccupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.01

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	0	6

Transaction ID: A2006-635630

Amount of Each Receipt this Period

38.82

B. Full Name (Last, First, Middle Initial)
JANE M MELLON

Mailing Address 184 GARFIELD

City	State	Zip Code
ELMHURST	IL	60126

FEC ID number of contributing
federal political committee.**C**Name of Employer
Allstate Insurance CompanyOccupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.83

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	0	6

Transaction ID: A2006-636151

Amount of Each Receipt this Period

38.82

C. Full Name (Last, First, Middle Initial)
NEIL J MINNICH

Mailing Address 405 N. WABASH AVE. UNIT 4210

City	State	Zip Code
CHICAGO	IL	60611

FEC ID number of contributing
federal political committee.**C**Name of Employer
Allstate Insurance CompanyOccupation
Underwriting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

314.14

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	0	6

Transaction ID: A2006-635404

Amount of Each Receipt this Period

39.63

SUBTOTAL of Receipts This Page (optional)

117.27

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 101 / 196

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial) NEIL J MINNICH		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 8 / 2 0 0 6
Mailing Address 405 N. WABASH AVE. UNIT 4210		Transaction ID: A2006-635928
City CHICAGO	State IL	Zip Code 60611
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 39.63
Name of Employer Allstate Insurance Company	Occupation Underwriting Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 353.77	

B. Full Name (Last, First, Middle Initial) LAWRENCE P MOEWS		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 4 / 2 0 0 6
Mailing Address 740 W. JENNIFER CT.		Transaction ID: A2006-635620
City LAKE FOREST	State IL	Zip Code 60045
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 47.65
Name of Employer Allstate Insurance Company	Occupation Vice President Investor R	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 323.89	

C. Full Name (Last, First, Middle Initial) LAWRENCE P MOEWS		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 8 / 2 0 0 6
Mailing Address 740 W. JENNIFER CT.		Transaction ID: A2006-636141
City LAKE FOREST	State IL	Zip Code 60045
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 47.65
Name of Employer Allstate Insurance Company	Occupation Vice President Investor R	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 371.54	

SUBTOTAL of Receipts This Page (optional)

134.93

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
EDWARD J MORAN
Mailing Address 131 ADELAIDE UNIT 406

City State Zip Code
ELMHURST IL 60126

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP PCCSO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.71

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635489

Amount of Each Receipt this Period

47.22

B. Full Name (Last, First, Middle Initial)
EDWARD J MORAN
Mailing Address 131 ADELAIDE UNIT 406

City State Zip Code
ELMHURST IL 60126

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP PCCSO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.93

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636012

Amount of Each Receipt this Period

47.22

C. Full Name (Last, First, Middle Initial)
KAREN S MORRIS
Mailing Address 27707 LA VISTA DRIVE

City State Zip Code
MUNDELEIN IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.12

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635737

Amount of Each Receipt this Period

38.09

SUBTOTAL of Receipts This Page (optional)

132.53

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
KAREN S MORRIS

Mailing Address 27707 LA VISTA DRIVE

City State Zip Code
 MUNDELEIN IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.21

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636257

Amount of Each Receipt this Period

38.09

B. Full Name (Last, First, Middle Initial)
LARRY E MOSER

Mailing Address 611 W. BURNING TREE LANE

City State Zip Code
 ARLINGTON HTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Sales Operations Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.06

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635629

Amount of Each Receipt this Period

28.27

C. Full Name (Last, First, Middle Initial)
LARRY E MOSER

Mailing Address 611 W. BURNING TREE LANE

City State Zip Code
 ARLINGTON HTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Sales Operations Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.33

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636150

Amount of Each Receipt this Period

28.27

SUBTOTAL of Receipts This Page (optional)

94.63

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MEGHAN O MULVIHILL

Mailing Address 2445 CHERRY LANE

City State Zip Code
NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Associate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.36

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	0	6

Transaction ID: A2006-635496

Amount of Each Receipt this Period

27.92

B. Full Name (Last, First, Middle Initial)
MICHAEL F MULVIHILL

Mailing Address 2445 CHERRY LANE

City State Zip Code
NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.28

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	0	6

Transaction ID: A2006-635613

Amount of Each Receipt this Period

35.26

C. Full Name (Last, First, Middle Initial)
MEGHAN O MULVIHILL

Mailing Address 2445 CHERRY LANE

City State Zip Code
NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Associate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.28

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	0	6

Transaction ID: A2006-636019

Amount of Each Receipt this Period

27.92

SUBTOTAL of Receipts This Page (optional)

91.10

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MICHAEL F MULVIHILL
Mailing Address 2445 CHERRY LANE

City State Zip Code
NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.54

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636134

Amount of Each Receipt this Period

35.26

B. Full Name (Last, First, Middle Initial)
MICHAEL A MURPHY
Mailing Address 233 WOOD CREEK ROAD #305

City State Zip Code
WHEELING IL 60090

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.03

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635839

Amount of Each Receipt this Period

39.76

C. Full Name (Last, First, Middle Initial)
MICHAEL A MURPHY
Mailing Address 233 WOOD CREEK ROAD #305

City State Zip Code
WHEELING IL 60090

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.79

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636357

Amount of Each Receipt this Period

39.76

SUBTOTAL of Receipts This Page (optional)

114.78

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 106 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
DAVID G NADIG
Mailing Address 2950 LAKE PLACID

City State Zip Code
NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.83

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635757

Amount of Each Receipt this Period

46.23

B. Full Name (Last, First, Middle Initial)
DAVID G NADIG
Mailing Address 2950 LAKE PLACID

City State Zip Code
NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.06

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636277

Amount of Each Receipt this Period

46.23

C. Full Name (Last, First, Middle Initial)
BRIAN J NAGEL
Mailing Address 1211 AIMTREE

City State Zip Code
SCHAUMBURG IL 60194

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.05

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635651

Amount of Each Receipt this Period

35.95

SUBTOTAL of Receipts This Page (optional)

128.41

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
BRIAN J NAGEL

Mailing Address 1211 AIMTREE

City State Zip Code
 SCHAUMBURG IL 60194

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636171

Amount of Each Receipt this Period

35.95

B. Full Name (Last, First, Middle Initial)
DANIEL C NECASTRO

Mailing Address 22622 N. LINDEN DR

City State Zip Code
 BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

810.01

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635595

Amount of Each Receipt this Period

104.62

C. Full Name (Last, First, Middle Initial)
DANIEL C NECASTRO

Mailing Address 22622 N. LINDEN DR

City State Zip Code
 BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

914.63

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636116

Amount of Each Receipt this Period

104.62

SUBTOTAL of Receipts This Page (optional)

245.19

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 108 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial) NEIL C NELSON Mailing Address 2794 BRECKENRIDGE CIRCLE City State Zip Code AURORA IL 60504 FEC ID number of contributing federal political committee. C Name of Employer Allstate Insurance Company Occupation CC IT Senior Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.36		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 8 / 2 0 0 6 Transaction ID: A2006-636309 Amount of Each Receipt this Period 25.59
B. Full Name (Last, First, Middle Initial) JO B NORTON Mailing Address 611 WESTBROOK DRIVE City State Zip Code AUSTIN TX 78746 FEC ID number of contributing federal political committee. C Name of Employer Allstate Insurance Company Occupation Home Office Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 217.25		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 8 / 2 0 0 6 Transaction ID: A2006-636348 Amount of Each Receipt this Period 24.60
C. Full Name (Last, First, Middle Initial) BRENDAN D O'CONNELL Mailing Address 13025 21ST STREET City State Zip Code WADSWORTH IL 60083 FEC ID number of contributing federal political committee. C Name of Employer Allstate Insurance Company Occupation Unclassified Sr Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 248.24		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 4 / 2 0 0 6 Transaction ID: A2006-635744 Amount of Each Receipt this Period 31.03

SUBTOTAL of Receipts This Page (optional)

81.22

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 109 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
BRENDAN D O'CONNELL
Mailing Address 13025 21ST STREET

City State Zip Code
WADSWORTH IL 60083

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Unclassified Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.27

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636264

Amount of Each Receipt this Period

31.03

B. Full Name (Last, First, Middle Initial)
BRIAN M O'DELL
Mailing Address 3434 WHITE ADMIRAL COURT

City State Zip Code
EDGEWATER MD 21037

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Territorial Distribution

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.56

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635501

Amount of Each Receipt this Period

31.32

C. Full Name (Last, First, Middle Initial)
BRIAN M O'DELL
Mailing Address 3434 WHITE ADMIRAL COURT

City State Zip Code
EDGEWATER MD 21037

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Territorial Distribution

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.88

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636024

Amount of Each Receipt this Period

31.32

SUBTOTAL of Receipts This Page (optional)

93.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MICHAEL P O'SHEA
Mailing Address 2505 NEWPORT DRIVE

City State Zip Code
NAPERVILLE IL 60565

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Agency Consulting Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.11

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-635968

Amount of Each Receipt this Period

24.54

B. Full Name (Last, First, Middle Initial)
ROGER D ODLE II
Mailing Address 5170 BARCROFT DRIVE

City State Zip Code
HOFFMAN ESTATES IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior State Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.68

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635721

Amount of Each Receipt this Period

29.51

C. Full Name (Last, First, Middle Initial)
ROGER D ODLE II
Mailing Address 5170 BARCROFT DRIVE

City State Zip Code
HOFFMAN ESTATES IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior State Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.19

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636241

Amount of Each Receipt this Period

29.51

SUBTOTAL of Receipts This Page (optional)

83.56

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 111 / 196

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)

CRAIG A OLDHAM

Mailing Address 2606 N Paulina ST

City State Zip Code
 CHICAGO IL 60614

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.50

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635805

Amount of Each Receipt this Period

32.40

B. Full Name (Last, First, Middle Initial)

CRAIG A OLDHAM

Mailing Address 2606 N Paulina ST

City State Zip Code
 CHICAGO IL 60614

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.90

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636324

Amount of Each Receipt this Period

32.40

C. Full Name (Last, First, Middle Initial)

AL W OLSSON JR

Mailing Address 1524 BONHAM CT

City State Zip Code
 IRVING TX 75038

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Data Center

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

441.45

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635406

Amount of Each Receipt this Period

56.38

SUBTOTAL of Receipts This Page (optional)

121.18

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. AL W OLSSON JR

Mailing Address 1524 BONHAM CT

City State Zip Code
 IRVING TX 75038

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Data Center

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

497.83

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-635930

Amount of Each Receipt this Period

56.38

Full Name (Last, First, Middle Initial)

B. JAMES L OSBORNE

Mailing Address 1224 ST. WILLIAM

City State Zip Code
 LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Procurement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

473.26

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635826

Amount of Each Receipt this Period

60.96

Full Name (Last, First, Middle Initial)

C. JAMES L OSBORNE

Mailing Address 1224 ST. WILLIAM

City State Zip Code
 LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Procurement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

534.22

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636345

Amount of Each Receipt this Period

60.96

SUBTOTAL of Receipts This Page (optional)

178.30

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)

PAMELA J OVERTON

Mailing Address 9352 ANSLEY LANE

City State Zip Code
 BRENTWOOD TN 37027

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claims Field Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.39

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635542

Amount of Each Receipt this Period

34.58

B. Full Name (Last, First, Middle Initial)

PAMELA J OVERTON

Mailing Address 9352 ANSLEY LANE

City State Zip Code
 BRENTWOOD TN 37027

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claims Field Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.97

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636064

Amount of Each Receipt this Period

34.58

C. Full Name (Last, First, Middle Initial)

GEORGE H OXENDINE

Mailing Address 1 SOUTH HIGHLAND AVENUE #603

City State Zip Code
 ARLINGTON HEIGHTS IL 60005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claim Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.22

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635518

Amount of Each Receipt this Period

25.94

SUBTOTAL of Receipts This Page (optional)

95.10

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
GEORGE H OXENDINE

Mailing Address 1 SOUTH HIGHLAND AVENUE #603

City State Zip Code
 ARLINGTON HEIGHTS IL 60005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claim Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.16

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636041

Amount of Each Receipt this Period

25.94

B. Full Name (Last, First, Middle Initial)
ALAN D PAGE

Mailing Address 13530 LUCKY LAKE DRIVE

City State Zip Code
 LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-Agency Distribution

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.75

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635902

Amount of Each Receipt this Period

34.62

C. Full Name (Last, First, Middle Initial)
ALAN D PAGE

Mailing Address 13530 LUCKY LAKE DRIVE

City State Zip Code
 LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-Agency Distribution

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.37

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636420

Amount of Each Receipt this Period

34.62

SUBTOTAL of Receipts This Page (optional)

95.18

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
DEAN T PAPPAS

Mailing Address 3406 VICEROY COURT

City State Zip Code
EDGEWATER MD 21037

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

306.45

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	0	6

Transaction ID: A2006-635491

Amount of Each Receipt this Period

39.25

B. Full Name (Last, First, Middle Initial)
DEAN T PAPPAS

Mailing Address 3406 VICEROY COURT

City State Zip Code
EDGEWATER MD 21037

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.70

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	0	6

Transaction ID: A2006-636014

Amount of Each Receipt this Period

39.25

C. Full Name (Last, First, Middle Initial)
ROBERT L PARK

Mailing Address 1107 BONITA DRIVE

City State Zip Code
PARK RIDGE IL 60068

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
AVP Public Relations Mana

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

397.48

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	0	6

Transaction ID: A2006-635722

Amount of Each Receipt this Period

50.98

SUBTOTAL of Receipts This Page (optional)

129.48

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
 ROBERT L PARK
 Mailing Address 1107 BONITA DRIVE

City State Zip Code
 PARK RIDGE IL 60068

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 AVP Public Relations Mana

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

448.46

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636242

Amount of Each Receipt this Period

50.98

B. Full Name (Last, First, Middle Initial)
 ROGER D PARKER
 Mailing Address 1305 N MAIDSTONE

City State Zip Code
 VERNON HILLS IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 AVP Corporate Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

356.90

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635894

Amount of Each Receipt this Period

46.17

C. Full Name (Last, First, Middle Initial)
 ROGER D PARKER
 Mailing Address 1305 N MAIDSTONE

City State Zip Code
 VERNON HILLS IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 AVP Corporate Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.07

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636412

Amount of Each Receipt this Period

46.17

SUBTOTAL of Receipts This Page (optional)

143.32

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MAYUR M PATEL
Mailing Address 742 E PARKVIEW CT

City State Zip Code
ROSELLE IL 60172

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.02

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635654

Amount of Each Receipt this Period

28.89

B. Full Name (Last, First, Middle Initial)
MAYUR M PATEL
Mailing Address 742 E PARKVIEW CT

City State Zip Code
ROSELLE IL 60172

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.91

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636174

Amount of Each Receipt this Period

28.89

C. Full Name (Last, First, Middle Initial)
BARRY S PAUL
Mailing Address 3010 LILAC LANE

City State Zip Code
NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP & Assistant Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.22

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635470

Amount of Each Receipt this Period

31.44

SUBTOTAL of Receipts This Page (optional)

89.22

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 118 / 196

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial) CHARLES PAUL Mailing Address 301 CAMELOT LANE City LIBERTYVILLE State IL Zip Code 60048 FEC ID number of contributing federal political committee. C Name of Employer Allstate Insurance Company Occupation Vice President PCCSO Stra Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 507.47		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 4 / 2 0 0 6 Transaction ID: A2006-635475 Amount of Each Receipt this Period 66.19
B. Full Name (Last, First, Middle Initial) BARRY S PAUL Mailing Address 3010 LILAC LANE City NORTHBROOK State IL Zip Code 60062 FEC ID number of contributing federal political committee. C Name of Employer Allstate Insurance Company Occupation AVP & Assistant Treasurer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 249.66		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 8 / 2 0 0 6 Transaction ID: A2006-635993 Amount of Each Receipt this Period 31.44
C. Full Name (Last, First, Middle Initial) CHARLES PAUL Mailing Address 301 CAMELOT LANE City LIBERTYVILLE State IL Zip Code 60048 FEC ID number of contributing federal political committee. C Name of Employer Allstate Insurance Company Occupation Vice President PCCSO Stra Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 573.66		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 8 / 2 0 0 6 Transaction ID: A2006-635998 Amount of Each Receipt this Period 66.19

SUBTOTAL of Receipts This Page (optional)**163.82****TOTAL** This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 119 / 196

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
RONALD J PEPPING

Mailing Address 934 LEWIS PLACE

City State Zip Code
GENEVA IL 60134

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Ivantage Financial Manage

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.69

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	0	6

Transaction ID: A2006-635696

Amount of Each Receipt this Period

28.43

B. Full Name (Last, First, Middle Initial)
RONALD J PEPPING

Mailing Address 934 LEWIS PLACE

City State Zip Code
GENEVA IL 60134

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Ivantage Financial Manage

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.12

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	0	6

Transaction ID: A2006-636216

Amount of Each Receipt this Period

28.43

C. Full Name (Last, First, Middle Initial)
FLORIE S PERELLIS

Mailing Address 1480 MINTHAVEN RD

City State Zip Code
LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.64

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	0	6

Transaction ID: A2006-635432

Amount of Each Receipt this Period

45.69

SUBTOTAL of Receipts This Page (optional)

102.55

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 120 / 196

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)

FLORIE S PERELLIS

Mailing Address 1480 MINTHAVEN RD

City	State	Zip Code
LAKE FOREST	IL	60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.33

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	0	6

Transaction ID: A2006-635956

Amount of Each Receipt this Period

45.69

B.

Full Name (Last, First, Middle Initial)

STEVEN A PETTI

Mailing Address 580 SALCEDA DR

City	State	Zip Code
MUNDELEIN	IL	60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
AVP Property & Casualty F

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.05

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	0	6

Transaction ID: A2006-635431

Amount of Each Receipt this Period

47.19

C.

Full Name (Last, First, Middle Initial)

STEVEN A PETTI

Mailing Address 580 SALCEDA DR

City	State	Zip Code
MUNDELEIN	IL	60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
AVP Property & Casualty F

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.24

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	0	6

Transaction ID: A2006-635955

Amount of Each Receipt this Period

47.19

SUBTOTAL of Receipts This Page (optional)

140.07

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 121 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
JAMES M PLOTTS

Mailing Address 1651 TIMBER WOODS LANE

City State Zip Code
LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
GVP-AGENCY & CUSTOMER SUP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

562.21

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635764

Amount of Each Receipt this Period

72.70

B. Full Name (Last, First, Middle Initial)
JAMES M PLOTTS

Mailing Address 1651 TIMBER WOODS LANE

City State Zip Code
LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
GVP-AGENCY & CUSTOMER SUP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

634.91

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636284

Amount of Each Receipt this Period

72.70

C. Full Name (Last, First, Middle Initial)
DAVID J PRENDERGAST

Mailing Address 2816 HAVEN LANE

City State Zip Code
LINDENHURST IL 60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Regional Distribution Lea

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.60

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635423

Amount of Each Receipt this Period

35.25

SUBTOTAL of Receipts This Page (optional)

180.65

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 122 / 196
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
DAVID J PRENDERGAST

Mailing Address 2816 HAVEN LANE

City State Zip Code
LINDENHURST IL 60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Regional Distribution Lea

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.85

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-635947

Amount of Each Receipt this Period

35.25

B. Full Name (Last, First, Middle Initial)
MARTIN PRZYGODA

Mailing Address 17516 KATIE COURT

City State Zip Code
GURNEE IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Finance and Planning

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.96

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635608

Amount of Each Receipt this Period

26.78

C. Full Name (Last, First, Middle Initial)
MARTIN PRZYGODA

Mailing Address 17516 KATIE COURT

City State Zip Code
GURNEE IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Finance and Planning

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.74

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636129

Amount of Each Receipt this Period

26.78

SUBTOTAL of Receipts This Page (optional)

88.81

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 123 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JORGE A QUEZADA

Mailing Address 1407 W. GROVE ST

City State Zip Code
 ARLINGTON HGTS IL 60005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Product Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.77

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635912

Amount of Each Receipt this Period

26.74

Full Name (Last, First, Middle Initial)

B. JORGE A QUEZADA

Mailing Address 1407 W. GROVE ST

City State Zip Code
 ARLINGTON HGTS IL 60005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Product Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.51

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636430

Amount of Each Receipt this Period

26.74

Full Name (Last, First, Middle Initial)

C. JOSEPH P RATH

Mailing Address 359 STAFFORD COURT

City State Zip Code
 LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

418.39

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635559

Amount of Each Receipt this Period

54.32

SUBTOTAL of Receipts This Page (optional)

107.80

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 124 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOSEPH P RATH

Mailing Address 359 STAFFORD COURT

City State Zip Code
 LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

472.71

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636080

Amount of Each Receipt this Period

54.32

Full Name (Last, First, Middle Initial)

B. JOHN B REARDON

Mailing Address 441 KELLY LANE

City State Zip Code
 CRYSTAL LAKE IL 60012

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claims Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.20

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635407

Amount of Each Receipt this Period

38.15

Full Name (Last, First, Middle Initial)

C. JOHN B REARDON

Mailing Address 441 KELLY LANE

City State Zip Code
 CRYSTAL LAKE IL 60012

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claims Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

343.35

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-635931

Amount of Each Receipt this Period

38.15

SUBTOTAL of Receipts This Page (optional)

130.62

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 125 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOSEPH J RICHARDSON

Mailing Address 1411 PARSONS LANE

City State Zip Code
 LOWER GWYNEDD PA 19002

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

477.01

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635479

Amount of Each Receipt this Period

61.70

Full Name (Last, First, Middle Initial)

B. JOSEPH J RICHARDSON

Mailing Address 1411 PARSONS LANE

City State Zip Code
 LOWER GWYNEDD PA 19002

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

538.71

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636002

Amount of Each Receipt this Period

61.70

Full Name (Last, First, Middle Initial)

C. ROBIN R RICHMOND

Mailing Address 9 HAWTHORN GROVE CIRCLE

City State Zip Code
 HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Technology Shared Ser

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.52

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636266

Amount of Each Receipt this Period

24.68

SUBTOTAL of Receipts This Page (optional)

148.08

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 126 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ANDREW T RIEDER

Mailing Address 7 ONEIDA LANE

City State Zip Code
 HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Homeowner Initiative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

353.56

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635484

Amount of Each Receipt this Period

45.35

Full Name (Last, First, Middle Initial)

B. ANDREW T RIEDER

Mailing Address 7 ONEIDA LANE

City State Zip Code
 HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Homeowner Initiative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.91

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636007

Amount of Each Receipt this Period

45.35

Full Name (Last, First, Middle Initial)

C. JESSICA D RIVERA

Mailing Address 2055 LOCKRIDGE PLACE

City State Zip Code
 EL DORADO HILLS CA 95762

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Corporate Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

351.29

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635907

Amount of Each Receipt this Period

45.25

SUBTOTAL of Receipts This Page (optional)

135.95

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 127 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JESSICA D RIVERA

Mailing Address 2055 LOCKRIDGE PLACE

City State Zip Code
 EL DORADO HILLS CA 95762

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Corporate Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.54

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636425

Amount of Each Receipt this Period

45.25

Full Name (Last, First, Middle Initial)

B. MARIO RIZZO

Mailing Address 5926 W. 90TH PLACE

City State Zip Code
 OAK LAWN IL 60453

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Property & Casualty F

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

293.03

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635673

Amount of Each Receipt this Period

38.30

Full Name (Last, First, Middle Initial)

C. MARIO RIZZO

Mailing Address 5926 W. 90TH PLACE

City State Zip Code
 OAK LAWN IL 60453

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Property & Casualty F

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

331.33

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636193

Amount of Each Receipt this Period

38.30

SUBTOTAL of Receipts This Page (optional)

121.85

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 128 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. THOMAS H ROBERTS

Mailing Address 5273 W. EMERSON AVE.

City

PALATINE

State

IL

Zip Code

60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CC IT Senior Manager

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

231.04

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635776

Amount of Each Receipt this Period

28.88

Full Name (Last, First, Middle Initial)

B. CLAY F ROBERTS

Mailing Address 387 Long Hill Road

City

Gurnee

State

IL

Zip Code

60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CC IT Planning Consultant

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

260.95

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635895

Amount of Each Receipt this Period

32.70

Full Name (Last, First, Middle Initial)

C. THOMAS H ROBERTS

Mailing Address 5273 W. EMERSON AVE.

City

PALATINE

State

IL

Zip Code

60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CC IT Senior Manager

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

259.92

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636296

Amount of Each Receipt this Period

28.88

SUBTOTAL of Receipts This Page (optional)

90.46

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 129 / 196

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
CLAY F ROBERTS

Mailing Address 387 Long Hill Road

City	State	Zip Code
Gurnee	IL	60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
CC IT Planning Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

293.65

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	0	6

Transaction ID: A2006-636413

Amount of Each Receipt this Period

32.70

B. Full Name (Last, First, Middle Initial)
GREGORY C ROHLFING

Mailing Address 106 ASHLAND

City	State	Zip Code
RIVER FOREST	IL	60305

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.85

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	0	6

Transaction ID: A2006-635590

Amount of Each Receipt this Period

39.77

C. Full Name (Last, First, Middle Initial)
GREGORY C ROHLFING

Mailing Address 106 ASHLAND

City	State	Zip Code
RIVER FOREST	IL	60305

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

409.62

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	0	6

Transaction ID: A2006-636111

Amount of Each Receipt this Period

39.77

SUBTOTAL of Receipts This Page (optional)

112.24

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 130 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
DONNA J ROSEMEYER

Mailing Address 810 S THURLOW STREET

City State Zip Code
HINSDALE IL 60521

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President PCCSO Fiel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.68

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636202

Amount of Each Receipt this Period

25.95

B. Full Name (Last, First, Middle Initial)
GEORGE E RUEBENSON

Mailing Address 29 FOX TR

City State Zip Code
LINCOLNSHIRE IL 60069

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP-P-CCSO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

688.81

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635741

Amount of Each Receipt this Period

91.15

C. Full Name (Last, First, Middle Initial)
GEORGE E RUEBENSON

Mailing Address 29 FOX TR

City State Zip Code
LINCOLNSHIRE IL 60069

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP-P-CCSO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

779.96

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636261

Amount of Each Receipt this Period

91.15

SUBTOTAL of Receipts This Page (optional)

208.25

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 131 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MICHAEL A SCARDINA

Mailing Address 51 SOUTH ROYAL OAK

City State Zip Code
 VERNON HILLS IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Asset Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.98

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636082

Amount of Each Receipt this Period

27.73

Full Name (Last, First, Middle Initial)

B. DOUGLAS A SCHAEN

Mailing Address 40392 N SUNSET COURT

City State Zip Code
 ANTIOCH IL 60002

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AF Operations Dept Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.01

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636236

Amount of Each Receipt this Period

23.04

Full Name (Last, First, Middle Initial)

C. HERBERT M SCHLESACK

Mailing Address 405 CREST HILL DRIVE

City State Zip Code
 PROSPECT HGHTS IL 60070

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Planning Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.44

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635621

Amount of Each Receipt this Period

31.93

SUBTOTAL of Receipts This Page (optional)

82.70

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 132 / 196

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
HERBERT M SCHLESACK

Mailing Address 405 CREST HILL DRIVE

City State Zip Code
 PROSPECT HGHTS IL 60070

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Planning Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

338.73

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636142

Amount of Each Receipt this Period

83.29

B. Full Name (Last, First, Middle Initial)
PATRICK J SCHNEIDER

Mailing Address 210 NORTH TRAIL

City State Zip Code
 HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.63

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635727

Amount of Each Receipt this Period

27.66

C. Full Name (Last, First, Middle Initial)
PATRICK J SCHNEIDER

Mailing Address 210 NORTH TRAIL

City State Zip Code
 HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.29

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636247

Amount of Each Receipt this Period

27.66

SUBTOTAL of Receipts This Page (optional)

138.61

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 133 / 196

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
STEPHEN E SCHOLL
Mailing Address 7 COPPERFIELD DRIVE

City State Zip Code
HAWTHORN WOODS IL 60047

FEC ID number of contributing federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
AVP HR Shared Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.79

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635468

Amount of Each Receipt this Period

47.97

B. Full Name (Last, First, Middle Initial)
STEPHEN E SCHOLL
Mailing Address 7 COPPERFIELD DRIVE

City State Zip Code
HAWTHORN WOODS IL 60047

FEC ID number of contributing federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
AVP HR Shared Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.76

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-635991

Amount of Each Receipt this Period

47.97

C. Full Name (Last, First, Middle Initial)
DAVID J SCHWARTZER
Mailing Address 1911 205TH PL NE

City State Zip Code
SAMMAMISH WA 98074

FEC ID number of contributing federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Assistant Field Vice Pres

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.21

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635794

Amount of Each Receipt this Period

38.89

SUBTOTAL of Receipts This Page (optional)

134.83

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 134 / 196

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
DAVID J SCHWARTZER

Mailing Address 1911 205TH PL NE

City State Zip Code
 SAMMAMISH WA 98074

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Assistant Field Vice Pres

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.10

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636313

Amount of Each Receipt this Period

38.89

B. Full Name (Last, First, Middle Initial)
JUDITH M SEILER

Mailing Address 908 SHORELINE ROAD

City State Zip Code
 BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.44

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-663098

Amount of Each Receipt this Period

27.08

C. Full Name (Last, First, Middle Initial)
DANNY R SELLERS

Mailing Address 5903 87TH ST

City State Zip Code
 LUBBOCK TX 79424

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Marketing Claims Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.09

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636349

Amount of Each Receipt this Period

23.16

SUBTOTAL of Receipts This Page (optional)

89.13

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 135 / 196

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. STACY Y SHARPE

Mailing Address 2 E. Erie #1506

City State Zip Code
 Chicago IL 60611

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Communication Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635713

Amount of Each Receipt this Period

29.25

Full Name (Last, First, Middle Initial)

B. STACY Y SHARPE

Mailing Address 2 E. Erie #1506

City State Zip Code
 Chicago IL 60611

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Communication Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.25

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636233

Amount of Each Receipt this Period

29.25

Full Name (Last, First, Middle Initial)

C. STEVEN E SHEBIK

Mailing Address 517 ROBINWOOD LANE

City State Zip Code
 WHEATON IL 60187

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Property/C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

590.86

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635681

Amount of Each Receipt this Period

76.15

SUBTOTAL of Receipts This Page (optional)

134.65

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
STEVEN E SHEBIK

Mailing Address 517 ROBINWOOD LANE

City State Zip Code
WHEATON IL 60187

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Property/C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

667.01

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636201

Amount of Each Receipt this Period

76.15

B. Full Name (Last, First, Middle Initial)
DAVID J SILVERMAN

Mailing Address 382 BARN SWALLOW LANE

City State Zip Code
VERNON HILLS IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claim Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.12

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635765

Amount of Each Receipt this Period

33.14

C. Full Name (Last, First, Middle Initial)
DAVID J SILVERMAN

Mailing Address 382 BARN SWALLOW LANE

City State Zip Code
VERNON HILLS IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claim Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.26

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636285

Amount of Each Receipt this Period

33.14

SUBTOTAL of Receipts This Page (optional)

142.43

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 137 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
 ROBERT L SIMMONS
 Mailing Address 418 DEUCE DRIVE

City State Zip Code
 WALL NJ 07719

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.46

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635455

Amount of Each Receipt this Period

27.47

B. Full Name (Last, First, Middle Initial)
 ROBERT L SIMMONS
 Mailing Address 418 DEUCE DRIVE

City State Zip Code
 WALL NJ 07719

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.93

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-635978

Amount of Each Receipt this Period

27.47

C. Full Name (Last, First, Middle Initial)
 KIMBALL S SIMON
 Mailing Address 11 WEHRHEIM

City State Zip Code
 BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.24

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635861

Amount of Each Receipt this Period

34.98

SUBTOTAL of Receipts This Page (optional)

89.92

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 138 / 196

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
KIMBALL S SIMON
Mailing Address 11 WEHRHEIM

City State Zip Code
BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.22

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636379

Amount of Each Receipt this Period

34.98

B. Full Name (Last, First, Middle Initial)
ANNE E SIMPSON
Mailing Address 632 ONWENTSIA AVENUE

City State Zip Code
HIGHLAND PARK IL 60035

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Tax Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.48

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635593

Amount of Each Receipt this Period

26.51

C. Full Name (Last, First, Middle Initial)
ANNE E SIMPSON
Mailing Address 632 ONWENTSIA AVENUE

City State Zip Code
HIGHLAND PARK IL 60035

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Tax Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.99

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636114

Amount of Each Receipt this Period

26.51

SUBTOTAL of Receipts This Page (optional)

88.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 139 / 196

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial) DAVID N SITZ		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 8 / 2 0 0 6
Mailing Address 519A CHICAGO AVE.		Transaction ID: A2006-636125
City EVANSTON	State IL	Zip Code 60202
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.07
Name of Employer Allstate Insurance Company	Occupation Associate Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.23	

B. Full Name (Last, First, Middle Initial) KEVIN R SLAWIN		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 4 / 2 0 0 6
Mailing Address 1316 CRESTWOOD DRIVE		Transaction ID: A2006-635724
City NORTHBROOK	State IL	Zip Code 60062
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 39.03
Name of Employer Allstate Insurance Company	Occupation VP AF Admin Serv	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 305.59	

C. Full Name (Last, First, Middle Initial) KEVIN R SLAWIN		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 8 / 2 0 0 6
Mailing Address 1316 CRESTWOOD DRIVE		Transaction ID: A2006-636244
City NORTHBROOK	State IL	Zip Code 60062
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 39.03
Name of Employer Allstate Insurance Company	Occupation VP AF Admin Serv	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 344.62	

SUBTOTAL of Receipts This Page (optional)

103.13

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 140 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
KIMBERLY J SLOANE
Mailing Address 378 N. VISTA AVE

City State Zip Code
LOMBARD IL 60148

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claim Reserve Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.78

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635702

Amount of Each Receipt this Period

36.26

B. Full Name (Last, First, Middle Initial)
KIMBERLY J SLOANE
Mailing Address 378 N. VISTA AVE

City State Zip Code
LOMBARD IL 60148

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claim Reserve Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.04

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636222

Amount of Each Receipt this Period

36.26

C. Full Name (Last, First, Middle Initial)
JOHN R SMITH
Mailing Address BOX 5916 RFD

City State Zip Code
LONG GROVE IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP-AGENCY & CUSTOMER SUP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.11

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635509

Amount of Each Receipt this Period

50.55

SUBTOTAL of Receipts This Page (optional)

123.07

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 141 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. SUZANNE C SMITH

Mailing Address 1061 PRAIRIE AVENUE

City State Zip Code
 LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.31

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635668

Amount of Each Receipt this Period

39.76

Full Name (Last, First, Middle Initial)

B. J E SMITH

Mailing Address 310 WHITMORE LANE

City State Zip Code
 LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP Distribution and Chann

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

441.77

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635684

Amount of Each Receipt this Period

57.05

Full Name (Last, First, Middle Initial)

C. JOHN R SMITH

Mailing Address BOX 5916 RFD

City State Zip Code
 LONG GROVE IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP-AGENCY & CUSTOMER SUP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

444.66

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636032

Amount of Each Receipt this Period

50.55

SUBTOTAL of Receipts This Page (optional)

147.36

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
SUZANNE C SMITH

Mailing Address 1061 PRAIRIE AVENUE

City State Zip Code
LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

332.07

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636188

Amount of Each Receipt this Period

39.76

B. Full Name (Last, First, Middle Initial)
J E SMITH

Mailing Address 310 WHITMORE LANE

City State Zip Code
LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP Distribution and Chann

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

498.82

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636204

Amount of Each Receipt this Period

57.05

C. Full Name (Last, First, Middle Initial)
RANDALL D SNITTJER

Mailing Address 11423 E. Blue Sky Drive

City State Zip Code
Scottsdale AZ 85262

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.32

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636368

Amount of Each Receipt this Period

25.58

SUBTOTAL of Receipts This Page (optional)

122.39

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 143 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. STEVEN P SORENSON

Mailing Address 20712 High Ridge Dr

City State Zip Code
 KILDEER IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-Agency Distribution

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.33

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635781

Amount of Each Receipt this Period

70.90

Full Name (Last, First, Middle Initial)

B. STEVEN P SORENSON

Mailing Address 20712 High Ridge Dr

City State Zip Code
 KILDEER IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-Agency Distribution

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

621.23

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636301

Amount of Each Receipt this Period

70.90

Full Name (Last, First, Middle Initial)

C. KEVIN A SPATARO

Mailing Address 1663 SARATOGA LANE

City State Zip Code
 GLENVIEW IL 60026

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Account Research

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.40

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636268

Amount of Each Receipt this Period

25.31

SUBTOTAL of Receipts This Page (optional)

167.11

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
EDWIN M SPECHT

Mailing Address 740 AMBRIA DRIVE

City State Zip Code
 MUNDELEIN IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Human Resource Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.59

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635488

Amount of Each Receipt this Period

32.98

B. Full Name (Last, First, Middle Initial)
EDWIN M SPECHT

Mailing Address 740 AMBRIA DRIVE

City State Zip Code
 MUNDELEIN IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Human Resource Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.57

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636011

Amount of Each Receipt this Period

32.98

C. Full Name (Last, First, Middle Initial)
JAMES G SPORLEDER

Mailing Address 20 LAKESIDE LANE

City State Zip Code
 N. BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.21

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635740

Amount of Each Receipt this Period

25.90

SUBTOTAL of Receipts This Page (optional)

91.86

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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or each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JAMES G SPORLEDER

Mailing Address 20 LAKESIDE LANE

City State Zip Code
 N. BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.11

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636260

Amount of Each Receipt this Period

25.90

Full Name (Last, First, Middle Initial)

B. MARY SPRINGBERG

Mailing Address 4745 KINGS WAY - NORTH

City State Zip Code
 GURNEE IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Technology Shared Ser

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.94

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635565

Amount of Each Receipt this Period

37.99

Full Name (Last, First, Middle Initial)

C. MARY SPRINGBERG

Mailing Address 4745 KINGS WAY - NORTH

City State Zip Code
 GURNEE IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Technology Shared Ser

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.93

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636086

Amount of Each Receipt this Period

37.99

SUBTOTAL of Receipts This Page (optional)

101.88

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
EMORY D STEPHENS JR

Mailing Address 4711 N WOLCOTT AVE

City State Zip Code
CHICAGO IL 60640

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.76

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635516

Amount of Each Receipt this Period

37.38

B. Full Name (Last, First, Middle Initial)
EMORY D STEPHENS JR

Mailing Address 4711 N WOLCOTT AVE

City State Zip Code
CHICAGO IL 60640

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.14

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636039

Amount of Each Receipt this Period

37.38

C. Full Name (Last, First, Middle Initial)
GARY S STERE

Mailing Address 2015 SELVA MADERA COURT

City State Zip Code
ATLANTIC BEACH FL 32233

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.79

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635531

Amount of Each Receipt this Period

35.78

SUBTOTAL of Receipts This Page (optional)

110.54

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 147 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial) GARY S STERE		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 8 / 2 0 0 6
Mailing Address 2015 SELVA MADERA COURT		Transaction ID: A2006-636054 Amount of Each Receipt this Period 35.78
City ATLANTIC BEACH	State FL Zip Code 32233	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.57	

B. Full Name (Last, First, Middle Initial) KEVIN T SULLIVAN		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 4 / 2 0 0 6
Mailing Address 221 CARRIAGE HILL CIR		Transaction ID: A2006-635863 Amount of Each Receipt this Period 91.08
City LIBERTYVILLE	State IL Zip Code 60048	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Vice President Corporate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 710.09	

C. Full Name (Last, First, Middle Initial) CHRISTINE A SULLIVAN		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 8 / 2 0 0 6
Mailing Address 257 BIG TERRA LANE		Transaction ID: A2006-635919 Amount of Each Receipt this Period 23.87
City GURNEE	State IL Zip Code 60031	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation AVP PCCSO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 206.85	

SUBTOTAL of Receipts This Page (optional)

150.73

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 148 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
KEVIN T SULLIVAN
Mailing Address 221 CARRIAGE HILL CIR

City State Zip Code
LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Corporate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

801.17

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636381

Amount of Each Receipt this Period

91.08

B. Full Name (Last, First, Middle Initial)
KATHLEEN A SWAIN
Mailing Address 242 HIGHVIEW

City State Zip Code
ELMHURST IL 60126

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Enterprise Applicatio

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

383.36

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635597

Amount of Each Receipt this Period

48.97

C. Full Name (Last, First, Middle Initial)
KATHLEEN A SWAIN
Mailing Address 242 HIGHVIEW

City State Zip Code
ELMHURST IL 60126

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Enterprise Applicatio

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.33

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636118

Amount of Each Receipt this Period

48.97

SUBTOTAL of Receipts This Page (optional)

189.02

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
CASEY J SYLLA
Mailing Address 32 RIDERWOOD

City State Zip Code
BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
President Allstate Financ

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1088.99

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635779

Amount of Each Receipt this Period

140.77

B. Full Name (Last, First, Middle Initial)
CASEY J SYLLA
Mailing Address 32 RIDERWOOD

City State Zip Code
BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
President Allstate Financ

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1229.76

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636299

Amount of Each Receipt this Period

140.77

C. Full Name (Last, First, Middle Initial)
JERROLD S SZOSTAK
Mailing Address 1064 W GLENN TRAIL

City State Zip Code
ELK GROVE IL 60007

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claim Reserve Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.28

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635652

Amount of Each Receipt this Period

36.51

SUBTOTAL of Receipts This Page (optional)

318.05

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 150 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JERROLD S SZOSTAK

Mailing Address 1064 W GLENN TRAIL

City State Zip Code
 ELK GROVE IL 60007

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claim Reserve Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.79

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636172

Amount of Each Receipt this Period

36.51

Full Name (Last, First, Middle Initial)

B. W. J THOMPSON

Mailing Address 1734 SHOAL CREEK TERRACE

City State Zip Code
 VERNON HILLS IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior State Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.30

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635513

Amount of Each Receipt this Period

30.05

Full Name (Last, First, Middle Initial)

C. W. J THOMPSON

Mailing Address 1734 SHOAL CREEK TERRACE

City State Zip Code
 VERNON HILLS IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior State Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.35

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636036

Amount of Each Receipt this Period

30.05

SUBTOTAL of Receipts This Page (optional)

96.61

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 151 / 196

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MARK L THOMPSON

Mailing Address 3233 N RACINE #2

City State Zip Code
CHICAGO IL 60657

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
AVP-PRODUCT NON-STANDARD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.26

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	0	6

Transaction ID: A2006-636364

Amount of Each Receipt this Period

23.95

B. Full Name (Last, First, Middle Initial)
LOREE E TOEDMAN

Mailing Address 21949 HICKORY HILL DR.

City State Zip Code
KILDEER IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
AVP ENCOMPASS FIELD DISTR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.32

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	0	6

Transaction ID: A2006-635865

Amount of Each Receipt this Period

37.03

C. Full Name (Last, First, Middle Initial)
LOREE E TOEDMAN

Mailing Address 21949 HICKORY HILL DR.

City State Zip Code
KILDEER IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
AVP ENCOMPASS FIELD DISTR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.35

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	0	6

Transaction ID: A2006-636383

Amount of Each Receipt this Period

37.03

SUBTOTAL of Receipts This Page (optional)

98.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 152 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
 ROBERT E TRANSON
 Mailing Address 2644 N DOUGLAS

City State Zip Code
 ARLINGTON HTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Strategic Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.01

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635670

Amount of Each Receipt this Period

26.32

B. Full Name (Last, First, Middle Initial)
 ROBERT E TRANSON
 Mailing Address 2644 N DOUGLAS

City State Zip Code
 ARLINGTON HTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Strategic Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.33

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636190

Amount of Each Receipt this Period

26.32

C. Full Name (Last, First, Middle Initial)
 CHARLES E TRAUGOTT
 Mailing Address 18954 WEST NORTH WOODALE TRAIL

City State Zip Code
 LAKE VILLA IL 60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Field Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.58

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635537

Amount of Each Receipt this Period

71.33

SUBTOTAL of Receipts This Page (optional)

123.97

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 153 / 196

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial) MICHAEL J TREVINO		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 4 / 2 0 0 6
Mailing Address 1840 N. SAINT ANDREW DR.		Transaction ID: A2006-635833
City VERNON HILLS	State IL	Zip Code 60061
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.46
Name of Employer Allstate Insurance Company	Occupation Communication Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 237.13	

B. Full Name (Last, First, Middle Initial) MICHAEL J TREVINO		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 8 / 2 0 0 6
Mailing Address 1840 N. SAINT ANDREW DR.		Transaction ID: A2006-636352
City VERNON HILLS	State IL	Zip Code 60061
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.46
Name of Employer Allstate Insurance Company	Occupation Communication Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 267.59	

C. Full Name (Last, First, Middle Initial) JOSEPH V TRIPODI		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 4 / 2 0 0 6
Mailing Address 565 E DEERPATH RD		Transaction ID: A2006-635897
City LAKE FOREST	State IL	Zip Code 60045
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 99.23
Name of Employer Allstate Insurance Company	Occupation SVP Marketing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 769.62	

SUBTOTAL of Receipts This Page (optional)

160.15

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 154 / 196

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOSEPH V TRIPODI

Mailing Address 565 E DEERPATH RD

City State Zip Code
 LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

868.85

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636415

Amount of Each Receipt this Period

99.23

Full Name (Last, First, Middle Initial)

B. MELINDA S TUNNER

Mailing Address 5430 TALL OAKS DRIVE

City State Zip Code
 LONG GROVE IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Agency Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.17

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635817

Amount of Each Receipt this Period

42.70

Full Name (Last, First, Middle Initial)

C. MELINDA S TUNNER

Mailing Address 5430 TALL OAKS DRIVE

City State Zip Code
 LONG GROVE IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Agency Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.87

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636336

Amount of Each Receipt this Period

42.70

SUBTOTAL of Receipts This Page (optional)

184.63

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 155 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. WILLIAM A VAINISI

Mailing Address 636 BALMORAL LANE

City State Zip Code
 INVERNESS IL 60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.59

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635678

Amount of Each Receipt this Period

47.10

Full Name (Last, First, Middle Initial)

B. WILLIAM A VAINISI

Mailing Address 636 BALMORAL LANE

City State Zip Code
 INVERNESS IL 60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

409.69

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636198

Amount of Each Receipt this Period

47.10

Full Name (Last, First, Middle Initial)

C. KIMBERLY VAN NOSTERN

Mailing Address 660 PRESTWICK LANE #205

City State Zip Code
 WHEELING IL 60090

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Information Security

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.26

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636410

Amount of Each Receipt this Period

23.60

SUBTOTAL of Receipts This Page (optional)

117.80

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. WILLIAM P VANDERBORG

Mailing Address 561 W CROOKED STICK CT

City State Zip Code
 VERNON HILLS IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claims Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.05

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635596

Amount of Each Receipt this Period

32.70

Full Name (Last, First, Middle Initial)

B. WILLIAM P VANDERBORG

Mailing Address 561 W CROOKED STICK CT

City State Zip Code
 VERNON HILLS IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claims Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

293.75

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636117

Amount of Each Receipt this Period

32.70

Full Name (Last, First, Middle Initial)

C. PATRICIA C VANLAMMEREN

Mailing Address 9868 PALACE GREEN WAY

City State Zip Code
 VIENNA VA 22181

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.29

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635860

Amount of Each Receipt this Period

51.82

SUBTOTAL of Receipts This Page (optional)

117.22

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 157 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. PATRICIA C VANLAMMEREN

Mailing Address 9868 PALACE GREEN WAY

City State Zip Code
 VIENNA VA 22181

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.11

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636378

Amount of Each Receipt this Period

51.82

Full Name (Last, First, Middle Initial)

B. RICHARD VAVRA

Mailing Address 2514 S WESLEY AVENUE

City State Zip Code
 BERWYN IL 60402

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.71

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635589

Amount of Each Receipt this Period

37.52

Full Name (Last, First, Middle Initial)

C. RICHARD VAVRA

Mailing Address 2514 S WESLEY AVENUE

City State Zip Code
 BERWYN IL 60402

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

332.23

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636110

Amount of Each Receipt this Period

37.52

SUBTOTAL of Receipts This Page (optional)

126.86

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 158 / 196

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MICHAEL J VELOTTA

Mailing Address 1111 LOYOLA DR

City State Zip Code
LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Vice President Sec & Gene

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

579.20

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	0	6

Transaction ID: A2006-635818

Amount of Each Receipt this Period

74.22

B. Full Name (Last, First, Middle Initial)
MICHAEL J VELOTTA

Mailing Address 1111 LOYOLA DR

City State Zip Code
LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Vice President Sec & Gene

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

653.42

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	0	6

Transaction ID: A2006-636337

Amount of Each Receipt this Period

74.22

C. Full Name (Last, First, Middle Initial)
STEVEN C VERNEY

Mailing Address 37144 FOX HILL DR

City State Zip Code
WADSWORTH IL 60083

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Vice President & Treasure

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

501.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	0	6

Transaction ID: A2006-635448

Amount of Each Receipt this Period

64.83

SUBTOTAL of Receipts This Page (optional)

213.27

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 159 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
STEVEN C VERNEY

Mailing Address 37144 FOX HILL DR

City State Zip Code
WADSWORTH IL 60083

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President & Treasure

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

565.83

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-635971

Amount of Each Receipt this Period

64.83

B. Full Name (Last, First, Middle Initial)
MADELINE J WALKER

Mailing Address 5140 N SAN JUAN AVE

City State Zip Code
CLOVIS CA 93611

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Marketing Claims Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.69

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635556

Amount of Each Receipt this Period

28.43

C. Full Name (Last, First, Middle Initial)
MADELINE J WALKER

Mailing Address 5140 N SAN JUAN AVE

City State Zip Code
CLOVIS CA 93611

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Marketing Claims Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.12

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636077

Amount of Each Receipt this Period

28.43

SUBTOTAL of Receipts This Page (optional)

121.69

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 160 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
ANTON WANDERON
Mailing Address 112 BRISTOL PLACE

City State Zip Code
PONTE VEDRA FL 32082

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
DIRECTOR CREDIT DEPARTMEN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

426.76

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635530

Amount of Each Receipt this Period

48.47

B. Full Name (Last, First, Middle Initial)
ANTON WANDERON
Mailing Address 112 BRISTOL PLACE

City State Zip Code
PONTE VEDRA FL 32082

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
DIRECTOR CREDIT DEPARTMEN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.23

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636053

Amount of Each Receipt this Period

48.47

C. Full Name (Last, First, Middle Initial)
THOMAS M WARDEN
Mailing Address 146 LA GRANDE

City State Zip Code
MOSS BEACH CA 94038

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Research Center

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.41

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635548

Amount of Each Receipt this Period

30.69

SUBTOTAL of Receipts This Page (optional)

127.63

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 161 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. THOMAS M WARDEN

Mailing Address 146 LA GRANDE

City State Zip Code
MOSS BEACH CA 94038

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Research Center

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.10

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636069

Amount of Each Receipt this Period

30.69

Full Name (Last, First, Middle Initial)

B. EDWIN L WASINGER JR

Mailing Address 6245 MURIFIELD DRIVE

City State Zip Code
GURNEE IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claim Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.32

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635753

Amount of Each Receipt this Period

33.09

Full Name (Last, First, Middle Initial)

C. EDWIN L WASINGER JR

Mailing Address 6245 MURIFIELD DRIVE

City State Zip Code
GURNEE IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claim Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.41

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636273

Amount of Each Receipt this Period

33.09

SUBTOTAL of Receipts This Page (optional)

96.87

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 162 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)

DOUGLAS B WELCH

Mailing Address 1724 INDEPENDENCE AVE

City State Zip Code
 GLENVIEW IL 60026

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

409.87

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635577

Amount of Each Receipt this Period

53.15

B. Full Name (Last, First, Middle Initial)

DOUGLAS B WELCH

Mailing Address 1724 INDEPENDENCE AVE

City State Zip Code
 GLENVIEW IL 60026

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

463.02

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636098

Amount of Each Receipt this Period

53.15

C. Full Name (Last, First, Middle Initial)

JONATHAN J WELLS

Mailing Address 5394 W RIVER BEND DRIVE

City State Zip Code
 LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Field Operations M

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.60

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635848

Amount of Each Receipt this Period

29.40

SUBTOTAL of Receipts This Page (optional)

135.70

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 163 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JONATHAN J WELLS

Mailing Address 5394 W RIVER BEND DRIVE

City State Zip Code
 LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Field Operations M

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636366

Amount of Each Receipt this Period

29.40

Full Name (Last, First, Middle Initial)

B. ROBERT J WHITE

Mailing Address 909 STILLWATER COURT

City State Zip Code
 WESTON FL 33327

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Territorial Distribution

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.52

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635469

Amount of Each Receipt this Period

32.69

Full Name (Last, First, Middle Initial)

C. ROBERT J WHITE

Mailing Address 909 STILLWATER COURT

City State Zip Code
 WESTON FL 33327

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Territorial Distribution

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.21

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-635992

Amount of Each Receipt this Period

32.69

SUBTOTAL of Receipts This Page (optional)

94.78

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 164 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial) CYNTHIA R WHITLEY		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 4 / 2 0 0 6
Mailing Address 6722 NEW HAMPSHIRE TRAIL		Transaction ID: A2006-635515
City CRYSTAL LAKE	State IL	Zip Code 60012
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.80
Name of Employer Allstate Insurance Company	Occupation CC IT Systems Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 277.90	

B. Full Name (Last, First, Middle Initial) CYNTHIA R WHITLEY		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 8 / 2 0 0 6
Mailing Address 6722 NEW HAMPSHIRE TRAIL		Transaction ID: A2006-636038
City CRYSTAL LAKE	State IL	Zip Code 60012
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.80
Name of Employer Allstate Insurance Company	Occupation CC IT Systems Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 313.70	

C. Full Name (Last, First, Middle Initial) JOHN K WILCOX		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 4 / 2 0 0 6
Mailing Address 1120 JESSICA LANE		Transaction ID: A2006-635614
City LIBERTYVILLE	State IL	Zip Code 60048
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.33
Name of Employer Allstate Insurance Company	Occupation Product Operations Direct	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 237.49	

SUBTOTAL of Receipts This Page (optional)

101.93

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 165 / 196

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOHN K WILCOX

Mailing Address 1120 JESSICA LANE

City	State	Zip Code
LIBERTYVILLE	IL	60048

FEC ID number of contributing
federal political committee.**C**Name of Employer
Allstate Insurance CompanyOccupation
Product Operations Direct

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

267.82

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	0	6

Transaction ID: A2006-636135

Amount of Each Receipt this Period

30.33

Full Name (Last, First, Middle Initial)

B. ANISE D WILEY-LITTLE

Mailing Address 21030 W YORKSHIRE DR

City	State	Zip Code
KILDEER	IL	60047

FEC ID number of contributing
federal political committee.**C**Name of Employer
Allstate Insurance CompanyOccupation
Human Resource Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.94

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	0	6

Transaction ID: A2006-635866

Amount of Each Receipt this Period

37.23

Full Name (Last, First, Middle Initial)

C. ANISE D WILEY-LITTLE

Mailing Address 21030 W YORKSHIRE DR

City	State	Zip Code
KILDEER	IL	60047

FEC ID number of contributing
federal political committee.**C**Name of Employer
Allstate Insurance CompanyOccupation
Human Resource Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.17

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	0	6

Transaction ID: A2006-636384

Amount of Each Receipt this Period

37.23

SUBTOTAL of Receipts This Page (optional)

104.79

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 166 / 196

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JEFFREY W WILLIAMS

Mailing Address 7104 CHARDON COURT

City

CLARKSVILLE

State

MD

Zip Code

21029

FEC ID number of contributing
federal political committee.**C**Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

291.60

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635659

Amount of Each Receipt this Period

37.35

Full Name (Last, First, Middle Initial)

B. JEFFREY W WILLIAMS

Mailing Address 7104 CHARDON COURT

City

CLARKSVILLE

State

MD

Zip Code

21029

FEC ID number of contributing
federal political committee.**C**Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

328.95

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636179

Amount of Each Receipt this Period

37.35

Full Name (Last, First, Middle Initial)

C. THOMAS J WILSON

Mailing Address 2024 N. MOHAWK

City

CHICAGO

State

IL

Zip Code

60614

FEC ID number of contributing
federal political committee.**C**Name of Employer
Allstate Insurance Company

Occupation

President & COO

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1485.03

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635777

Amount of Each Receipt this Period

192.69

SUBTOTAL of Receipts This Page (optional)

267.39

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 167 / 196

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. THOMAS J WILSON

Mailing Address 2024 N. MOHAWK

City

CHICAGO

State

IL

Zip Code

60614

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

President & COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1677.72

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636297

Amount of Each Receipt this Period

192.69

Full Name (Last, First, Middle Initial)

B. DORETHA M WILSON-JOHNSON

Mailing Address 3902 BLACKSTONE

City

GURNEE

State

IL

Zip Code

60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Accounting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.82

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635801

Amount of Each Receipt this Period

62.04

Full Name (Last, First, Middle Initial)

C. DORETHA M WILSON-JOHNSON

Mailing Address 3902 BLACKSTONE

City

GURNEE

State

IL

Zip Code

60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Accounting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

547.86

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636320

Amount of Each Receipt this Period

62.04

SUBTOTAL of Receipts This Page (optional)

316.77

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
BRUCE A WOIKE
Mailing Address 1318 N. CHESTNUT AVE.

City State Zip Code
ARLINGTON HTS. IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Accounting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.77

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636262

Amount of Each Receipt this Period

19.88

B. Full Name (Last, First, Middle Initial)
RHONDA WOODARD
Mailing Address 2341 MARCY AVENUE

City State Zip Code
EVANSTON IL 60201

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-PRODUCT DELIVERY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.68

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635857

Amount of Each Receipt this Period

34.21

C. Full Name (Last, First, Middle Initial)
RHONDA WOODARD
Mailing Address 2341 MARCY AVENUE

City State Zip Code
EVANSTON IL 60201

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-PRODUCT DELIVERY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.89

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636375

Amount of Each Receipt this Period

34.21

SUBTOTAL of Receipts This Page (optional)

88.30

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 169 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
DONALD F WYATT JR

Mailing Address 811 DRESSER DR.

City State Zip Code
MT PROSPECT IL 60056

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.35

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635619

Amount of Each Receipt this Period

33.35

B. Full Name (Last, First, Middle Initial)
DONALD F WYATT JR

Mailing Address 811 DRESSER DR.

City State Zip Code
MT PROSPECT IL 60056

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.70

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636140

Amount of Each Receipt this Period

33.35

C. Full Name (Last, First, Middle Initial)
FLOYD M YAGER

Mailing Address 1610 BIRCH LANE

City State Zip Code
PARK RIDGE IL 60068

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Assistant Field Vice Pres

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.95

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635701

Amount of Each Receipt this Period

45.25

SUBTOTAL of Receipts This Page (optional)

111.95

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 170 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)

FLOYD M YAGER

Mailing Address 1610 BIRCH LANE

City State Zip Code
 PARK RIDGE IL 60068

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Assistant Field Vice Pres

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

392.20

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636221

Amount of Each Receipt this Period

45.25

B. Full Name (Last, First, Middle Initial)

LORI J YELVINGTON

Mailing Address 1531 N HIGHLAND AVE

City State Zip Code
 ARLINGTON HGTS. IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Procurement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.52

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635709

Amount of Each Receipt this Period

43.86

C. Full Name (Last, First, Middle Initial)

LORI J YELVINGTON

Mailing Address 1531 N HIGHLAND AVE

City State Zip Code
 ARLINGTON HGTS. IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Procurement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.38

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636229

Amount of Each Receipt this Period

43.86

SUBTOTAL of Receipts This Page (optional)

132.97

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 171 / 196

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
RICHARD P YOCIUS

Mailing Address 40135 N GOLDENROD

City State Zip Code
WADSWORTH IL 60083

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Senior State Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

318.08

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	0	6

Transaction ID: A2006-635622

Amount of Each Receipt this Period

39.76

B. Full Name (Last, First, Middle Initial)
RICHARD P YOCIUS

Mailing Address 40135 N GOLDENROD

City State Zip Code
WADSWORTH IL 60083

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Senior State Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.84

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	0	6

Transaction ID: A2006-636143

Amount of Each Receipt this Period

39.76

C. Full Name (Last, First, Middle Initial)
RICHARD M ZAHARIAS

Mailing Address 1439 STEVENSON DRIVE

City State Zip Code
LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
AVP Allstate Life Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

490.15

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	0	6

Transaction ID: A2006-635799

Amount of Each Receipt this Period

62.87

SUBTOTAL of Receipts This Page (optional)

142.39

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 172 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)

RICHARD M ZAHARIAS

Mailing Address 1439 STEVENSON DRIVE

City State Zip Code
LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Allstate Life Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

553.02

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636318

Amount of Each Receipt this Period

62.87

B. Full Name (Last, First, Middle Initial)

JAMES P ZILS

Mailing Address 832 PADDOCK LANE

City State Zip Code
LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP Investment Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.64

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635836

Amount of Each Receipt this Period

36.34

C. Full Name (Last, First, Middle Initial)

JAMES P ZILS

Mailing Address 832 PADDOCK LANE

City State Zip Code
LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP Investment Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.98

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636354

Amount of Each Receipt this Period

36.34

SUBTOTAL of Receipts This Page (optional)

135.55

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 173 / 196
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. GERALD L ZIMMERMAN JR

Mailing Address 2584 Sutton Lane

City

AURORA

State

IL

Zip Code

60502

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

267.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635788

Amount of Each Receipt this Period

34.50

Full Name (Last, First, Middle Initial)

B. GERALD L ZIMMERMAN JR

Mailing Address 2584 Sutton Lane

City

AURORA

State

IL

Zip Code

60502

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

301.50

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636307

Amount of Each Receipt this Period

34.50

Full Name (Last, First, Middle Initial)

C. J K ZUZICH

Mailing Address 1125 ACORN TRAIL

City

LAKE FOREST

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP HR People Planning &

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

261.21

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 4 / 2 0 0 6

Transaction ID: A2006-635854

Amount of Each Receipt this Period

33.78

SUBTOTAL of Receipts This Page (optional)

102.78

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 174 / 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)

J K ZUZICH

Mailing Address 1125 ACORN TRAIL

City

LAKE FOREST

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP HR People Planning &

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

294.99

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A2006-636372

Amount of Each Receipt this Period

33.78

SUBTOTAL of Receipts This Page (optional)

33.78

TOTAL This Period (last page this line number only)

22335.63

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Fifth Third Bank

Mailing Address 346 West Carol Lane

City Elmhurst State IL Zip Code 60062

Purpose of Disbursement

Bank Service Charge

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: IL

District:

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

Transaction ID: B140133

Date of Disbursement

04 / 13 / 2006

Amount of Each Disbursement this Period

0.05

Full Name (Last, First, Middle Initial)

B. Fifth Third Bank

Mailing Address 346 West Carol Lane

City Elmhurst State IL Zip Code 60062

Purpose of Disbursement

Bank Service Charge

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: IL

District:

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

Transaction ID: B140764

Date of Disbursement

04 / 13 / 2006

Amount of Each Disbursement this Period

229.88

SUBTOTAL of Disbursements This Page (optional)

229.93

TOTAL This Period (last page this line number only)

229.93

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 176 / 196

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Kirk for Congress

Mailing Address P.O. Box 8

City Winnetka State IL Zip Code 60093

Purpose of Disbursement
G-2006 U.S. House 10 IL

Candidate Name
Mark S Kirk

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 10

Transaction ID: B139531

Date of Disbursement

04 / 07 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Sandhills PAC

Mailing Address 1310 G Street NW Ste. 600

City Washington State DC Zip Code 20005

Purpose of Disbursement
O-2006 Fed Multi-cand. PAC US

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼

State: DC District:

Not Applicable

Transaction ID: B139532

Date of Disbursement

04 / 07 / 2006

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. Garrett for Congress

Mailing Address P.O. Box 905

City Newton State NJ Zip Code 07860

Purpose of Disbursement
P-2006 U.S. House 05 NJ

Candidate Name
E. Scott Garrett

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: NJ District: 05

Transaction ID: B139533

Date of Disbursement

04 / 07 / 2006

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. American Council of Life Insurers PAC

Mailing Address 101 Constitution Ave. Suite 700

City Washington State DC Zip Code 20001

Purpose of Disbursement
O-2006 Fed Multi-cand. PAC US

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: DC

District:

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

Transaction ID: B139896

Date of Disbursement

04 / 13 / 2006

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. NELPAC

Mailing Address 420 C Street NE

City Washington State DC Zip Code 20510

Purpose of Disbursement
O-2006 Fed Multi-cand. PAC US

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: DC

District:

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

Transaction ID: B139897

Date of Disbursement

04 / 13 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Friends of Dick Lugar Inc.

Mailing Address 47 S Meridian St Suite 200

City Indianapolis State IN Zip Code 46204

Purpose of Disbursement
P-2006 U.S. Senate IN

Candidate Name
Richard G Lugar

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

State: IN

District:

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: B139899

Date of Disbursement

04 / 13 / 2006

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Growth and Prosperity PAC

Mailing Address 217 - 3rd Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
O-2006 Fed Multi-cand. PAC US

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: DC

District:

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

Transaction ID: B140144

Date of Disbursement

04 / 19 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Bilirakis for Congress

Mailing Address PO Box 606

City Tarpon Spring State FL Zip Code 34688

Purpose of Disbursement
G-2006 U.S. House 09 FL

Candidate Name
Bilirakis Gus

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: FL

District: 09

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: B140232

Date of Disbursement

04 / 21 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Johnson for Congress Cmte

Mailing Address P.O. Box 1986

City New Britain State CT Zip Code 06050

Purpose of Disbursement
P-2006 U.S. House 05 CT

Candidate Name
Nancy L Johnson

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: CT

District: 05

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: B140233

Date of Disbursement

04 / 21 / 2006

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Pennsylvanians for Kanjorski

Mailing Address 126 S. Franklin Street

City Wilkes-Barre State PA Zip Code 18701

Purpose of Disbursement
P-2006 U.S. House 11 PA

Candidate Name
Paul E Kanjorski

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 11

Transaction ID: B140234

Date of Disbursement

04 / 21 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Pryce for Congress

Mailing Address 145 E Rich Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
P-2006 U.S. House 15 OH

Candidate Name
Deborah Pryce

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: OH District: 15

Transaction ID: B140235

Date of Disbursement

04 / 21 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Republican Main Street Partnership PAC

Mailing Address 1220 L Street NW Suite 100-263

City Washington State DC Zip Code 20005

Purpose of Disbursement
O-2006 Fed Multi-cand. PAC US

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼

State: DC District:

Not Applicable

Transaction ID: B140237

Date of Disbursement

04 / 21 / 2006

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Christopher Shays for Congress Cmte

Mailing Address 98 East Avenue Rear Building

City Norwalk State CT Zip Code 06851

Purpose of Disbursement
P-2006 U.S. House 04 CT

Candidate Name
Christopher Shays

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: CT District: 04

Transaction ID: B140238

Date of Disbursement

04 / 21 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. McConnell Senate Cmte.

Mailing Address 400 N. Capitol Street NW

City Washington State DC Zip Code 20001

Purpose of Disbursement
P-2008 U.S. Senate KY

Candidate Name
Mitch McConnell

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: KY District:

Transaction ID: B140435

Date of Disbursement

04 / 26 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Pomeroy for Congress

Mailing Address PO Box 9336

City Fargo State ND Zip Code 58106

Purpose of Disbursement
P-2006 U.S. House 01 ND

Candidate Name
Earl Pomeroy

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: ND District: 01

Transaction ID: B140436

Date of Disbursement

04 / 26 / 2006

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Sue Kelly for Congress

Mailing Address P.O. Box 599

City
Katonah

State
NY

Zip Code
10536

Purpose of Disbursement
P-2006 U.S. House 19 NY

Candidate Name
Sue Kelly

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 19

Transaction ID: B140540

Date of Disbursement

MM / DD / YY
04 / 27 / 2006

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

21500.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Californian Taxpayers for Horton (#1257906)

Mailing Address 1118 Parkview Drive

City Roseville State CA Zip Code 95661

Purpose of Disbursement
P-2006 State Brd. Of Equalization 04 CA

Candidate Name
Jerome E Horton

011
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2006 ☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 04

Transaction ID: B139529

Date of Disbursement

04 / 07 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Poochigian for Attorney General #1265332

Mailing Address 6001 Palm Drive

City Carmichael State CA Zip Code 95608

Purpose of Disbursement
P-2006 State Att. General CA

Candidate Name
Chuck Poochigian

011
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2006 ☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District:

Transaction ID: B139530

Date of Disbursement

04 / 07 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Lou Correa for Senate 2006 ID#1283161

Mailing Address 1215 K Street Suite 1400

City Sacramento State CA Zip Code 95814

Purpose of Disbursement
P-2006 State Senate 34 CA

Candidate Name
Lou Correa

011
Category/
Type

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2006 ☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 34

Transaction ID: B139895

Date of Disbursement

04 / 13 / 2006

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Joe Baca Jr. for State Senate ID# 1274714

Mailing Address 2005 N St.

City Sacramento State CA Zip Code 95814

Purpose of Disbursement
P-2006 State Senate 32 CA

Candidate Name
Joe Baca

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 32

Transaction ID: B140145

Date of Disbursement

04 / 19 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Daucher for Senate 2006 ID# 1282193

Mailing Address P.O. Box 1565

City Oakdale State CA Zip Code 95361

Purpose of Disbursement
P-2006 State Senate 34 CA

Candidate Name
Lynn Daucher

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 34

Transaction ID: B140146

Date of Disbursement

04 / 19 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Cathleen Galgiani for Assembly ID# 1273296

Mailing Address 1852 W. 11th Street #348

City Tracy State CA Zip Code 95376

Purpose of Disbursement
P-2006 State House 17 CA

Candidate Name
Cathleen Galgiani

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 17

Transaction ID: B140148

Date of Disbursement

04 / 19 / 2006

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Kehoe for State Senate 2008 ID# 1275140

Mailing Address 921 11th Street Ste 904

City Sacramento State CA Zip Code 95814

Purpose of Disbursement
P-2008 State Senate 39 CA

Candidate Name
Christine Kehoe

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President
Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 39

Transaction ID: B140149

Date of Disbursement

04 / 19 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Latino PAC ID# 1281906

Mailing Address 14991 Lago Drive

City Rancho Murieta State CA Zip Code 95683

Purpose of Disbursement
O-2006 State Multi-cand. PAC CA

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President
Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼

State: CA District:

Not Applicable

Transaction ID: B140150

Date of Disbursement

04 / 19 / 2006

Amount of Each Disbursement this Period

3300.00

Full Name (Last, First, Middle Initial)

C. Friends of Fabian Nunez 2006 ID# 1271581

Mailing Address 1100 O Street Ste. 200

City Sacramento State CA Zip Code 95814

Purpose of Disbursement
G-2006 State House 46 CA

Candidate Name
Fabian Nunez

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President
Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 46

Transaction ID: B140151

Date of Disbursement

04 / 19 / 2006

Amount of Each Disbursement this Period

3300.00

SUBTOTAL of Disbursements This Page (optional)

7100.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Richman for Treasurer ID# 1263366

Mailing Address P.O. Box 471

City Sacramento State CA Zip Code 95812

Purpose of Disbursement
P-2006 State Treasurer CA

Candidate Name
Keith S. Richman

011
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2006 ☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District:

Transaction ID: B140152

Date of Disbursement

04 / 19 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Sharon Runner for Assembly 2006 ID# 1272114

Mailing Address P.O. Box 471

City Sacramento State CA Zip Code 95812

Purpose of Disbursement
P-2006 State House 36 CA

Candidate Name
Sharon Runner

011
Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: 2006 ☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 36

Transaction ID: B140153

Date of Disbursement

04 / 19 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Re-Elect Audra Strickland for Assembly

Mailing Address 542 Traverse Drive

City Costa Mesa State CA Zip Code 92626

Purpose of Disbursement
P-2006 State House 37 CA

Candidate Name
Audra Strickland

011
Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: 2006 ☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 37

Transaction ID: B140154

Date of Disbursement

04 / 19 / 2006

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Pennsylvania Insurance PAC

Mailing Address 1600 Market Street #1520

City Philadelphia State PA Zip Code 19103

Purpose of Disbursement
O-2006 State Multi-cand. PAC PA

Candidate Name

011
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: PA District: Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼
Not Applicable

Transaction ID: B140239

Date of Disbursement

04 / 21 / 2006

Amount of Each Disbursement this Period

3500.00

Full Name (Last, First, Middle Initial)

B. Common Sense Leadership Committee

Mailing Address PO Box 792

City Harrisburg State PA Zip Code 17108

Purpose of Disbursement
O-2006 State Multi-cand. PAC PA

Candidate Name

011
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: PA District: Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼
Not Applicable

Transaction ID: B140317

Date of Disbursement

04 / 24 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Benoit for Assembly 2006 ID# 12730003

Mailing Address 1223 University Ave. Suite 220

City Riverside State CA Zip Code 92507

Purpose of Disbursement
G-2006 State House 64 CA

Candidate Name

John J Benoit

011
Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
State: CA District: 64 Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: B140318

Date of Disbursement

04 / 24 / 2006

Amount of Each Disbursement this Period

600.00

SUBTOTAL of Disbursements This Page (optional)

5100.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Hollingsworth for Senate 2006 ID# 1251235

Mailing Address PO Box 471

City
Sacramento

State
CA

Zip Code
95812

Purpose of Disbursement
P-2006 State Senate 36 CA

Candidate Name
Dennis Hollingsworth

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 36

Transaction ID: B140437

Date of Disbursement

04 / 26 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Van Tran for Assembly 2006 ID# 1272343

Mailing Address P.O. Box 471

City
Sacramento

State
CA

Zip Code
95812

Purpose of Disbursement
P-2006 State House 68 CA

Candidate Name
Van Tran

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 68

Transaction ID: B140439

Date of Disbursement

04 / 26 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Shirley Horton for Asmbly 2006 ID# 1273236

Mailing Address 7185 Navajo Road Suite L

City
San Diego

State
CA

Zip Code
92119

Purpose of Disbursement
P-2006 State House 78 CA

Candidate Name
Shirley Horton

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 78

Transaction ID: B140440

Date of Disbursement

04 / 26 / 2006

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Citizens for Christine Radogno

Mailing Address 410 Main Street Suite B

City Lemont State IL Zip Code 60439

Purpose of Disbursement
G-2006 State Treasurer ILCandidate Name
Christine Radogno011
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District:

Transaction ID: B140441

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	6		2	0	0	6

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Citizens to Elect Parke

Mailing Address P.O. Box 95666

City Hoffman Estates State IL Zip Code 60195

Purpose of Disbursement
G-2006 State House 44 ILCandidate Name
Terry Parke011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 44

Transaction ID: B140450

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	6		2	0	0	6

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. Marc Basnight Campaign Committee

Mailing Address Room 2007 Legislative Office Bldg.

City Raleigh State NC Zip Code 27601

Purpose of Disbursement
P-2006 State Senate 01 NCCandidate Name
Marc Basnight011
Category/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 01

Transaction ID: B140520

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	7		2	0	0	6

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Tony Rand Committee

Mailing Address 2008 Litho Place

City
Fayetteville

State
NC

Zip Code
28304

Purpose of Disbursement
P-2006 State Senate 19 NC

Candidate Name
Tony Rand

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 19

Transaction ID: B140521

Date of Disbursement

04 / 27 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. R.C. Soles Campaign Committee

Mailing Address P.O. Box 6

City
Tabor City

State
NC

Zip Code
28463

Purpose of Disbursement
P-2006 State Senate 08 NC

Candidate Name
R.C. Soles

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 08

Transaction ID: B140522

Date of Disbursement

04 / 27 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Jim Black Campaign Committee

Mailing Address 417 Lynderhill Lane

City
Matthews

State
NC

Zip Code
28105

Purpose of Disbursement
P-2006 State House 100 NC

Candidate Name
James B Black

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 10

Transaction ID: B140523

Date of Disbursement

04 / 27 / 2006

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Hugh Holliman Campaign Committee

Mailing Address 223-D South Main Street

City Lexington State NC Zip Code 27292

Purpose of Disbursement
P-2006 State House 81 NC

Candidate Name
Hugh Holliman

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 81

Transaction ID: B140524

Date of Disbursement

04 / 27 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Drew Saunders Committee

Mailing Address 204 Sherwood Drive

City Huntersville State NC Zip Code 28078

Purpose of Disbursement
P-2006 State House 99 NC

Candidate Name
Drew P Saunders

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 99

Transaction ID: B140525

Date of Disbursement

04 / 27 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Committee to Elect Lucy Allen

Mailing Address 312 North Main Street

City Louisburg State NC Zip Code 27549

Purpose of Disbursement
P-2006 State House 49 NC

Candidate Name
Lucy T Allen

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 49

Transaction ID: B140526

Date of Disbursement

04 / 27 / 2006

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. William Wainwright Campaign Cmte.

Mailing Address P.O. Box 33

City Havelock State NC Zip Code 28532

Purpose of Disbursement
P-2006 State House 12 NC

Candidate Name
William L Wainwright

Office Sought: ☒ House
☐ Senate
☐ President

State: NC District: 12

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: B140527

Date of Disbursement

/ /

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B. Thomas Wright Campaign Cmte.

Mailing Address P.O. Box 1654

City Wilmington State NC Zip Code 28402

Purpose of Disbursement
P-2006 State House 18 NC

Candidate Name
Thomas E Wright

Office Sought: ☒ House
☐ Senate
☐ President

State: NC District: 18

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: B140528

Date of Disbursement

/ /

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

C. Mitch Setzer Campaign Committee

Mailing Address PO Box 416

City Catawba State NC Zip Code 28609

Purpose of Disbursement
P-2006 State House 89 NC

Candidate Name
Mitchell S Setzer

Office Sought: ☒ House
☐ Senate
☐ President

State: NC District: 89

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: B140529

Date of Disbursement

/ /

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional)

750.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. David Lewis Campaign Committee

Mailing Address 1500 S. Clinton Ave.

City Dunn State NC Zip Code 28334

Purpose of Disbursement
P-2006 State House 53 NC

Candidate Name
David L Lewis

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 53

Transaction ID: B140530

Date of Disbursement

04 / 27 / 2006

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B. Karen Ray Campaign Cmte.

Mailing Address 262 Gibbs Road

City Mooresville State NC Zip Code 28117

Purpose of Disbursement
P-2006 State House 95 NC

Candidate Name
Karen B Ray

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 95

Transaction ID: B140531

Date of Disbursement

04 / 27 / 2006

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

C. Committee to Elect Jeff Barnhart

Mailing Address PO Box 246

City Concord State NC Zip Code 28026

Purpose of Disbursement
P-2006 State House 82 NC

Candidate Name
Jeffrey L Barnhart

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 82

Transaction ID: B140532

Date of Disbursement

04 / 27 / 2006

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional)

750.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Phil Berger Campaign Cmte.

Mailing Address P.O. Box 1309

City
Eden

State
NC

Zip Code
27289

Purpose of Disbursement
P-2006 State Senate 26 NC

Candidate Name
Phillip Berger

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 26

Transaction ID: B140533

Date of Disbursement

04 / 27 / 2006

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B. Linda Garrou Campaign Cmte.

Mailing Address 3910 Camerille Farm Road

City
Winston-Salem

State
NC

Zip Code
27106

Purpose of Disbursement
P-2006 State Senate 32 NC

Candidate Name
Linda Dew Garrou

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 32

Transaction ID: B140534

Date of Disbursement

04 / 27 / 2006

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

C. David Hoyle Campaign Committee

Mailing Address PO Box 2494

City
Gastonia

State
NC

Zip Code
28053

Purpose of Disbursement
P-2006 State Senate 43 NC

Candidate Name
David Hoyle

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 43

Transaction ID: B140535

Date of Disbursement

04 / 27 / 2006

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional)

750.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Julia Howard Campaign Cmte

Mailing Address 330 S. Salisbury St.

City
Mocksville

State
NC

Zip Code
27028

Purpose of Disbursement
P-2006 State House 79 NC

Candidate Name
Julia C Howard

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 79

Transaction ID: B140536

Date of Disbursement

04 / 27 / 2006

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B. Linda P. Johnson Campaign Cmte.

Mailing Address 1205 Berkshire Dr.

City
Kannapolis

State
NC

Zip Code
28081

Purpose of Disbursement
P-2006 State House 83 NC

Candidate Name
Linda P Johnson

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 83

Transaction ID: B140537

Date of Disbursement

04 / 27 / 2006

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

C. Richard Stevens Campaign Committee

Mailing Address 132 Lochwood West Drive

City
Cary

State
NC

Zip Code
27511

Purpose of Disbursement
P-2006 State Senate 17 NC

Candidate Name
Richard Stevens

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 17

Transaction ID: B140538

Date of Disbursement

04 / 27 / 2006

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional)

750.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Citizens to Elect Tom Cross

Mailing Address P.O. Box 825

City
Plainfield

State
IL

Zip Code
60544

Purpose of Disbursement
G-2006 State House 84 IL

Candidate Name
Tom Cross

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 84

Transaction ID: B140539

Date of Disbursement

MM / DD / YYYY
04 / 27 / 2006

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

31450.00

Form/Schedule: **SA11A1**

Transaction ID:

Please note that the PAC is aware that we follow an alternate method of itemizing payroll receipts rather than the suggested manner of disclosing a single total for the reporting period along with the amount deducted per pay period. Because the amounts collected per pay period may change often during the time covered by a single report, we find that reporting individual deductions separately more accurately discloses how the receipts are collected.
